

ALCOHOL CONSUMPTION IN IRELAND

2013: ANALYSIS OF A NATIONAL ALCOHOL DIARY SURVEY

Jean Long and Deirdre Mongan



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Members of the Advisory Committee

Professor Joe Barry
Dr Patricia Clarke
Professor Alan Kelly
Mr Liam McCormack
Mr Dara Murphy
Ms Marion Rackard



FOREWORD



Graham Love Chief Executive

Ireland has a complex relationship with alcohol. Its use has become embedded in our national identity and it is often associated with significant cultural and religious events.

It is generally accepted that the overall volume of alcohol consumption and the pattern of binge drinking predicts the incidence of alcohol-related harm. There is clear evidence of this in Ireland, where we see a huge burden of health and social harm, not just on those who drink, but on their families, friends and colleagues. There is also an economic cost with the latest estimates being €2.39 billion in combined health- and crime-related costs and €527 million in lost economic output, all at a time the country can least afford it.

As a nation, it is clear that we need to recognise, accept and tackle the negative consequences that can arise from our use of alcohol.

In 2013, the Government approved an extensive package of evidence-based measures to deal with alcohol use, which will be incorporated into the Public Health (Alcohol) Bill. This was significant because, for the first time, alcohol is being treated as a public health issue. The Government, in line with the Steering Group Report on a National Substance Misuse Strategy, aims to reduce per capita consumption from 11.9 litres per capita in 2010 to 9.2 litres in 2016.

The proposed strategic measures will increase price, limit availability and limit exposure to, and engagement with, marketing for underage audiences, and are based on the recommendations in the Steering Group Report on a National Substance Misuse Strategy. This group identified that price, availability and marketing are key factors influencing the supply of alcohol and, in turn, the volume and pattern of its consumption.

In preparation for the introduction of measures to reduce per capita alcohol consumption, the Department of Health asked the Health Research Board to conduct a survey that would provide data on personal consumption of, and expenditure on, alcohol among the population aged 18–75 years.

This report is a first for Ireland in terms of providing such detailed data on our alcohol consumption and expenditure. It shows that harmful drinking is very common in Ireland, in particular for men and women under 35 years, and because it is normal behaviour to consume high quantities in a single session, many people do not realise that they are harmful drinkers. These results provide important evidence to support the implementation of the actions approved for the forthcoming Public Health (Alcohol) Bill and against which its effectiveness can be monitored.

I would like to thank all the people who took part in the survey. They have provided a clear picture of drinking patterns and expenditure on alcohol in Ireland. I am also very grateful to Ipsos MRBI which, in conjunction with my own staff, managed this high-quality survey.

A handwritten signature in blue ink that reads "Graham Love". The signature is fluid and cursive, written in a professional style.

Graham Love *Chief Executive*



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SUMMARY

Rationale and methods

The main objective of the National Alcohol Diary Survey was to estimate personal consumption of, and expenditure on, alcohol among the general population aged 18–75 years living in private households in Ireland. The survey included a comprehensive series of questions on both the rates and patterns of alcohol consumption in Ireland and on alcohol-related harm, and it involved interviewing 5,991 respondents in 3,897 households. The respondents were randomly selected using a two-stage probability sampling procedure. The survey was completed between July and October 2013, and achieved a household response rate of 67.2% and a within-household response rate of 77.1%. The survey population was weighted by age, gender and regional distribution, to ensure that the survey population mirrored the Central Statistics Office’s population estimates for 2013.

General alcohol consumption patterns – key findings

- The rate of abstinence, defined as consuming no alcohol in the previous 12 months, was 20.6% (95% confidence interval, CI, 19.2%–22.1%) among 18–75-year-olds.
- Almost two-thirds (63.9%) of males and half (51.4%) of females started drinking alcohol before the age of 18 years.
- 77% (4,647) of respondents consumed alcohol in the 12 months prior to the survey and 69% (3,187) of drinkers consumed alcohol in the week prior to the survey.
- Just over one-quarter (26.1%) of drinkers reported consuming one to two standard drinks per drinking occasion, which is less than the 30% of drinkers in the 2007 SLÁN survey. One to two standard drinks amounts to 10–20g of pure alcohol (and equates with one-half or one pint of beer, one to two pub measures of spirits, or 100 to 200ml of wine) and is within the HSE’s recommended low-risk daily alcohol consumption limits.
- Almost one-quarter (24.1%) of drinkers aged 18–24 years consumed alcohol at least twice weekly and 64.3% consumed six or more standard drinks (which equates with 60g of alcohol or more, for example, three or more pints of beer, six or more pub measures of spirits, or 600ml or more of wine) on a typical drinking occasion. This equates with the criteria for risky single-occasion drinking or binge drinking.
- The vast majority, two-in-three (66.8%) drinkers and four-in-five (80.3%) male drinkers, consumed six or more standard drinks on the occasion that they consumed the highest number of standard drinks in the last year.



Alcohol consumption patterns in the week prior to the survey

- 69% (n=3,187) of those who consumed alcohol in the last year drank in the week prior to this survey.
- One-third of male drinkers and over one-fifth (22.8%) of female drinkers, who consumed alcohol in the week prior to the survey, drank more than the HSE's recommended low-risk weekly drinking guidelines (i.e., more than 16.8 standard drinks per week for men and 11.2 standard drinks for women). This measure was highest in the 18–24 years age group, with 43.8% of young men and 39.0% of young women drinking more than the recommended weekly guidelines.
- One-in-eight (12.9%) men and one-in-ten (9.1%) women consumed more than the recommended weekly guidelines in a single day in the week prior to the survey. This measure was, once again, highest in the 18–24 years age group, with one-in-four (27.9%) young men and one-in-five (22.5%) young women drinking more than the recommended weekly guidelines in a single day.
- Beer was the most common type of alcohol consumed by men of all age groups (76.7%), wine was the most common type of alcohol consumed by women aged over 25 years (58.9%), and spirits were the most common type of alcohol consumed by young women aged 18–24 years (59.9%). Cider was consumed by more than one-in-five young adults (22.5%).
- The preferred drinking venues for people aged over 25 years in the week prior to the survey was at their own or someone else's home (60–69%), while pubs, bars or nightclubs were the preferred venues for young people (72.3%).
- More people drank on the weekend days (Friday to Sunday) than on the weekdays (Monday to Thursday) and the same trend was observed for men and women and all age groups.
- The highest number of standard drinks were consumed at home (17,646, 42.7%), followed closely by the number of standard drinks consumed in a pub, nightclub or disco bar (17,251, 41.7%). A smaller number of standard drinks were consumed in a hotel or restaurant (4,313, 10.4%).
- Almost 6% of people drank alone during the week prior to the survey; 7% of men and 4.6% of women drank alone. The proportion who drank alone increased incrementally with age, with 1.8% of 18–24-year-olds drinking alone compared to 11.8% of 65–75-year-olds.

Expenditure on alcohol in the week prior to the survey

- In total, €96,267 was spent by survey respondents on alcohol in the week prior to the survey. The average price of a standard drink was €2.91. The survey respondents represent 0.19% of the adult population aged 18–75 years, and when this experience is applied to the adult population in Ireland, the spend was approximately €50,667,111 in a single week.



- One-in-eight (12.1%) people who consumed alcohol in the week prior to the survey spent €60 or more on alcohol in that week.
- Just below 60% of expenditure was spent in on-trade facilities and 35% was spent in off-trade facilities.
- The average price of a standard drink is highest in hotels or restaurants (at €4.58) and lowest at home or in someone else's home (at €2.76).

These self-reported prices do not include alcohol consumed by others; rather they include alcohol purchased by the respondent, which may explain the high price of each standard drink consumed at home.

Harmful and dependent alcohol consumption in the year prior to the survey

- Almost two-fifths (37.3%) of all respondents consumed six or more standard drinks on a single occasion one or more times a month in the last year; this practice is known as risky single-occasion drinking (RSOD) or binge drinking.
- One-in-five (21.1%) drinkers engaged in binge drinking at least once a week.
- Monthly binge drinking was most common among males aged 18–24 years (67.8%) and least common among women aged 65–75 years (5.2%).
- More than half (54.3%, 95% CI 52.5–56.1) of 18–75-year-old drinkers were classified as harmful drinkers using the World Health Organization's AUDIT-C screening tool. When the proportion of survey respondents classified as harmful drinkers is applied to the population, it indicates that there were between 1.3 and 1.4 million harmful drinkers in Ireland in 2013.
- Among Irish drinkers aged 18–75 years, 6.9% (95% CI 6.0–7.9) scored positive for dependence using the DSM-IV criteria, which is a set of criteria for measuring dependence and is the gold standard for identifying dependence in a clinical setting. This indicates that there were somewhere between 149,300 and 203,897 dependent drinkers aged 18–75 years in Ireland in 2013.
- Dependence was most common in 18–24-year-olds (14.7%) and least common among 65–75-year-olds (2.2%)

Harm to self and others in the year prior to the survey as a result of alcohol consumption

- The overall prevalence of drinkers experiencing at least one of the eight harms as a result of their own alcohol use was 29.9%, with men 1.5 times more likely than women to report harms (men 35.7%, women 24.1%).
- The overall prevalence of experiencing at least one of the five harms as a result of someone else's alcohol use was 17.1% (men 18% and women 15.6%).



Effect of alcohol on work and study

- The 3,276 respondents who work or are in education missed 1,083 days of work or study due to alcohol-related illness in the 12 months prior to the survey (which equates to 4.5 person work- or study-years). When the proportion of work- or study-days missed is applied to the total working and student population in Ireland, 736,486 work or study days or 3,230 work- or study-years were likely to have been lost in 2013.
- Of the 442 people who said they were unemployed at the time of the survey, six (1.4%) reported that they lost their job as a result of their alcohol consumption. The Central Statistics Office (CSO) reported that 391,507 people were on the Live Register at the end of November 2013, and when the experience among this representative sample is applied to the unemployed population, it is possible that 5,315 people on the Live Register in November 2013 lost their job due to alcohol use.

Own perception of alcohol consumption pattern

- The respondents were asked to classify their own drinking behaviour. A small proportion of respondents (2.1%) classified themselves as heavy drinkers who may or may not binge drink, while 39.6% classified themselves as moderate drinkers who may or may not binge drink, and 58.3% classified themselves as light drinkers who may or may not binge drink.
- When the self-perception assessment was cross-tabulated with the self-reported alcohol consumption on a typical drinking occasion, it was noted that one-in-five self-defined 'light drinkers who do not binge drink' and half of the self-defined 'moderate drinkers who do not binge drink' actually do so on a typical drinking occasion without realising it.

Conclusion

In the survey 75% of the alcohol consumed was done so as part of a binge drinking session. Given the proportions of drinkers whose reported consumption of alcohol meets the international criteria for harmful drinking (including binge drinking and the consumption of weekly limits on a single occasion) or dependent drinking, it may be concluded that we, in Ireland, consume alcohol in an unhealthy pattern. In addition, a considerable proportion of 'self-defined light or moderate drinkers' drink 60g or more of alcohol on a typical drinking occasion (equivalent to binge drinking) and do not realise that they consume alcohol in an unhealthy manner. The above findings lead to the conclusion that harmful drinking is the norm in Ireland, in particular for men and women under 35 years.

The reported amount of alcohol consumed by the survey population in the year prior to the survey, when multiplied to include the entire adult population, indicated that adults in Ireland consumed 4.2 litres of alcohol per person over 18 years. However, Revenue's provisional figures for 2013 indicate that 10.6 litres of alcohol per capita were sold in Ireland, which implies that Irish people reported 39% of their alcohol consumption, which is a considerable underestimate of total consumption.



INTRODUCTION

In May 2013, following a competitive tendering process, the Health Research Board commissioned Ipsos MRBI to organise, collect and validate the National Alcohol Diary Survey data. The rationale for this survey was to generate data that estimates personal consumption of, and expenditure on, alcohol, so as to inform the Department of Health's considerations of the National Substance Misuse Strategy [on alcohol] Steering Group recommendations.¹

The main objective of the National Alcohol Diary Survey was to estimate personal consumption of, and expenditure on, alcohol among the general population aged 18–75 years living in private households in Ireland. The data collected provides:

- 1 Levels of non-drinking (abstinence) in the last year (recent) and in the lifetime (ever);
- 2 Drinking patterns by gender and age groups;
- 3 Calculations of the amount of alcohol consumed as well as what, when and where adults drink, and who they drink with;
- 4 Details of expenditure on alcohol;
- 5 Estimations of the amount of alcohol consumed by adults at dependent, harmful, and low-risk drinking levels; and
- 6 Estimations of the harms to self and others caused by alcohol, such as dependence, injury, violence, days missed from work or study, and loss of employment.

This is the first time that such detailed data on alcohol consumption and expenditure are available for Ireland.

In order to provide a robust dataset that facilitated analysis by gender and age groups, Ipsos MRBI (which was awarded the tender) was required to interview a minimum of 5,400 adults at no less than 400 sampling points throughout the Republic of Ireland. The tenderers were asked to address the inherent difficulty in accurately measuring alcohol consumption through survey research. As such, the award of the contract was followed by a detailed project set-up stage that included questionnaire design, cognitive testing and piloting, in order to identify an approach that maximised both the survey participation rate and the level of accuracy of information provided by respondents.

This was followed by interviewer training in July and August 2013 and data collection between July and October 2013, and it included 5,991 interviews spread across 405 sampling points, representing a household response rate of 67.2% and a within-household response rate of 77.1%. The methods are summarised in the next section and are detailed in a technical bulletin prepared by Ipsos MRBI.²



METHODS

Alcohol questions

The survey included a comprehensive series of questions on both the rates and patterns of alcohol consumption in Ireland and on alcohol-related harm.

Respondents were asked to complete a diary of their previous week's alcohol consumption detailing: each drinking occasion by day of the week and time of day, the types and amount of alcohol drunk on each occasion, as well as where they drank and who they drank with. Quantity was measured by asking how many standard drinks were consumed on each drinking occasion in the week prior to the survey. In Ireland a standard drink contains 10g of pure alcohol and is equivalent to half a pint of beer or cider, a single pub measure of spirits, a small (100ml) glass of wine, or a bottle of alcopops; this measure is different from the United Kingdom's unit of alcohol. In addition, respondents were asked to detail their expenditure on alcohol.

Respondents were asked questions about the type of alcohol (beer, wine, spirits), as well as frequency and quantity of alcohol consumed on a typical drinking occasion in the previous 12 months. In addition, they were asked about risky single-occasion drinking (RSOD), more commonly known as binge drinking, which was defined as consuming 60g or more of pure alcohol on a single drinking occasion. This corresponds to a minimum of three pints of beer or six pub measures of spirits or 600ml of wine. There are no definitive guidelines on what constitutes RSOD; for this survey 60g was used to denote RSOD, as this is the definition which was used by the European Commission's project 'Standardizing Measurement of Alcohol-Related Troubles (SMART)'.³

A number of instruments have been developed to measure harmful or dependent alcohol use.

The AUDIT-C is a short version of the Alcohol Use Disorders Identification Test (AUDIT), which was developed by the World Health Organization to screen for excessive drinking and to identify persons with hazardous and harmful drinking patterns. It has been shown to be effective in screening for harmful drinking patterns in healthcare settings and in population surveys.⁴⁻⁷ A cut-off score of five was used to denote harmful drinking in this survey.

The 10th Revision of the International Classification of Diseases and Health Problems (ICD-10) defines dependence as 'a cluster of physiological, behavioural, and cognitive phenomena in which the use of alcohol takes on a much higher priority for a given individual than other behaviours that once had greater value'.⁸ The DSM-IV, which is the gold standard for the clinical diagnosis of alcohol dependence, was used in the survey.⁹ A person is considered dependent on alcohol if they answer yes to three or more of the seven criteria during the 12 months prior to the survey.



The seven criteria are:

- 1 Tolerance;
- 2 Withdrawal symptoms or clinically defined alcohol withdrawal syndrome;
- 3 Use in larger amounts or for longer periods than intended;
- 4 Persistent desire or unsuccessful efforts to cut down on alcohol use;
- 5 Time is spent obtaining alcohol or recovering from effects;
- 6 Social, occupational and recreational pursuits are given up or reduced because of alcohol use; and
- 7 Use is continued despite knowledge of alcohol-related harm (physical or psychological).

Eight questions on harms (to self) were asked of those who had consumed alcohol in the previous 12 months:

- 1 Felt that your drinking harmed your home life or marriage;
- 2 Felt that your drinking harmed your friendships or social life;
- 3 Felt that your drinking harmed your health;
- 4 Felt that your drinking harmed your work or studies: for example, missing school/work, not doing your work/studies well or losing your job/dropping out of school;
- 5 Felt that your drinking harmed your finances;
- 6 Been in an accident when you had been drinking;
- 7 Got into a physical fight when you had been drinking; and
- 8 Stopped by the police because of drunk driving or drunken behaviour.

Five measures were used to assess the negative consequences experienced by people as a result of someone else's drinking (harm to others). The harm to others questions were asked of all participants, including drinkers and non-drinkers:

- 1 Had property vandalised by someone who had been drinking;
- 2 Been a passenger with a driver who had too much to drink;
- 3 Been hit or assaulted by someone who had been drinking;
- 4 Had financial trouble because of someone else's drinking; and
- 5 Had family problems or relationship difficulties as a result of someone else's drinking.



In addition, respondents were asked if they had missed work due to alcohol in the last year, and those who were currently unemployed were asked if they had lost their job because of alcohol.¹⁰

While some of the questions used in this survey were also used in the last SLÁN survey which was conducted in 2007,¹¹ and in the NACD's general population survey on alcohol and other drugs which was conducted in 2010–11,¹² the age profile of the respondents in the three surveys differs. The SLÁN survey included all adults aged 18 years and over, the NACD analysis only included adults aged 18–64 years, and this survey includes adults aged 18–75 years. As the three surveys were completed with different age groups, care should be taken when comparing the three surveys.

Questionnaire: content, design, cognitive testing and pilot testing

An initial questionnaire draft, prepared by the Health Research Board, was based on questionnaires used in the Northern Ireland alcohol diary survey,¹³ the 2007 SLÁN survey,¹¹ the 2010/11 NACD drug prevalence survey¹² and the Australian Government's 2013 National Drug Strategy Household Survey. (<http://www.aihw.gov.au/WorkArea/DownloadAsset.aspx?id=60129545967>).

The questionnaire complies with recommendations from the SMART Project funded by the European Commission.³

The questionnaire was structured in a way that maximised the ability and willingness of respondents to provide accurate and comprehensive information about their alcohol consumption. Furthermore, the Health Research Board and Ipsos MRBI sought to enhance the survey experience and to ensure that questions minimised the overall interview length.

Cognitive testing is a technique that is routinely used to evaluate questionnaire content, in order to ensure that questions are being understood by respondents in the way that is intended by the researchers. The approach used by Ipsos MRBI to test this questionnaire involved 'think-aloud interviewing', whereby the respondent is asked to talk through their thought process as they arrive at an answer, and 'verbal probing', whereby the respondent is required to provide further information on their answer. Following the cognitive testing, the following changes were made to the questionnaire:

- Frequency bands were extended to include categories for 'Once a week' and '2 to 3 times a week'.
- Further clarification included within-question wording, in order to clarify what was meant by a drinking location and drinking occasion.
- Additional response categories were added to some questions, and some existing answers were reworded in order to improve respondents' ability to select a response to the question.



- Development of computer assisted personal interviewing (CAPI) mechanisms to ensure that contradictions were replaced in the data by the higher answer given.
- In the drinking perception question, binge drinking was removed as a discrete category and instead was shown in conjunction with other categories (i.e., light, moderate or heavy).

Following agreement on changes to be implemented following the cognitive testing stage, the questionnaire was converted into a CAPI script suitable for interviewing.

In advance of the main survey stage, a pilot survey was conducted by Ipsos MRBI in order to get an understanding of how the survey would operate in the person's home and how well the survey content and material would be received by respondents. In particular, it allowed for testing of survey material such as advance letters, consent forms and interviewer introductions. In undertaking this stage, 50 interviews were conducted between 20 and 25 June 2013 across four locations (two urban and two rural). All households were sent an advance letter. The interviews were conducted through CAPI, with all relevant supporting documentation (such as contact sheets, self-completion questionnaires and consent forms). The average length of interview at the pilot stage was 13.4 minutes, with the longest interview taking 38 minutes to administer. A number of learnings arose from this stage, which led to changes in survey administration for the main stage of fieldwork.

These included:

- An emphasis that the survey needed to include both drinkers and non-drinkers. Interviewers were briefed to maximise the participation levels regardless of drinking behaviour.
- The requirement for interviewers to read out the consent form was removed before the main stage, as it was less disruptive, and respondents read the consent form themselves before signing it.

Sample: size, frame and selection

The sampling process used involved the selection of households throughout Ireland, with an attempt to interview all eligible adults living in each household. The objective of this study was to deliver a minimum sample size of 5,400 respondents in 400 sampling points. In calculating the sample size for this study, a number of assumptions were made regarding eligibility and participation rates, and these are presented in Table 1. This table also presents the assumptions made regarding design effect and intra-cluster correlation in order to estimate the likely effective sample size in advance of conducting the study.



TABLE 1 Sample size calculation and sample design

Number of clusters	405
Number of addresses per cluster	16
Total number of sample addresses selected	6,480
Estimated number eligible (85% eligible, i.e., not vacant, eligible adult living at sample addresses)	5,508
Expected household participation (60% response rate)	3,304
Estimated number of individuals within participating households (1.95)	6,682
Expected number of completed interviews (81% response rate within households)	5,412
Expected number of completed interviews per cluster (average)	13.36
Intra-cluster correlation (ρ)	0.01
Design effect due to clustering ($Deff_c$)	1.12
Total design effect ($Deff_{tot}$)	1.29
Effective sample size (n_{eff})	4,188

The sampling frame used for the study was the An Post/Ordnance Survey Ireland GeoDirectory database, as it represents all members of the target population for the study. On this basis, the GeoDirectory database offers a number of significant advantages over alternative sources such as the electoral register, most importantly in terms of comprehensive coverage of up-to-date addresses.

In order to identify the number of sampling points to be selected for this probability-based study, it was first necessary to identify the desired cluster size. This involved the balancing of three competing requirements:

- 1 Impact on precision of survey estimates** (Larger clusters tend to be associated with larger design effects and thus lower precision.)
- 2 Impact on response rate** (If clusters are too small, response rates can fall because the interviewer is likely to visit the area on fewer occasions. This may translate into greater non-response bias.)
- 3 Costs** (Costs per interview tend to be lower with larger clusters, due to factors such as reduced travel expenses.)

Having considered these three factors, it was decided to issue the sample in clusters of 16 addresses. The target number of achieved interviews was 5,400, which meant that 405 sample points were required in order to complete the study. These calculations were based on assumed ineligibility of some premises (15%) and eligible household response rates (60%), with an average of 1.95 adults per household (source: Census 2011). Furthermore, as interviews were to be sought with all eligible adults living in each household, it was necessary



to assume a participation rate within households, and, based on similar studies, this was set at 81% for the purposes of calculating the required sample size.

A two-stage approach to selecting sample addresses was taken, with the first stage involving the selection of geographical areas for surveying and the second stage involving the selection of specific addresses within those areas.

The first stage, selecting geographical areas, ensured that all electoral divisions were of sufficient size to allow for meaningful selection. In order to do so, all electoral divisions with fewer than 150 addresses were combined with another 150-address electoral division in the same rural or town district. This was repeated until all electoral divisions in all rural/town districts had at least 150 addresses. This process reduced the number of potential sampling points available for selection from 3,409 to 2,956.

The second stage in this process involved stratifying the sampling frame to ensure that the selected points were representative of the target population. Two variables were used to stratify the sampling frame: the degree of urbanity and social class.

The required number of sampling points (405) was then selected by using a random start point and a systematic skip. As some of the electoral divisions were substantially larger than the systematic skip, six electoral divisions were selected twice and one electoral division was selected three times. As a result, multiple sampling points were established in these sampling points.

The GeoDirectory database was then used to select addresses within each sampling point. In doing so, the full list of addresses within each selected sampling point was used, and the required number of addresses (16) were selected in each of 405 sampling points using a random start point and a systematic skip.

As there are a high number of non-unique addresses in Ireland, it naturally followed that there were certain sampling points where a lot of the addresses that were selected were non-unique (either sharing an address with another selected household or another household that was not selected). In these situations, the interviewer was required to randomly select one of the households that shared the same address. This was done using a Kish Grid and, once selected, interviewers were not permitted to replace this selected household with any other household with that address.

All addresses that were selected by this sampling process were required to be visited during the fieldwork period. Multiple visits (on different days and at different times of day) were required in order to achieve an outcome (completed interview or refusal or ineligible for interview) at each address. If no response was received at an address, a minimum of five 'no response visits' were required before that address could be considered to be unsuccessful. Interviewers also left appointment cards at households where a respondent was not at home. This card provided brief details of the study and a name and telephone number to call either to arrange an appointment at a time most convenient for them or to find out more about the study. Interviewers made an attempt to interview all adults aged 18–75 years living at each address.



Interview: training, procedures and informed consent

A series of four one-day briefing sessions was organised by Ipsos MRBI between 17 July and 7 August 2013 at four locations throughout Ireland. Ninety seven interviewers working on the project attended one of these sessions. All interviews were conducted between 18 July and 11 October 2013. In addition to this in-person briefing, all interviewers were issued with an interviewer manual and had access to telephone and e-mail support from survey supervisors throughout the fieldwork period.

While the interviewing methodology is relatively straightforward to administer, ensuring that it is done in the correct manner requires the implementation of specific strategies so as to confirm that respondents understand what is involved in the survey and can provide informed consent. Details on the specific strategies used in this study are presented in the following paragraphs.

Two advance letters were provided to all households that were selected to take part in the study. One letter was sent on Health Research Board headed paper to inform the householder that it had commissioned Ipsos MRBI to undertake this study and that their household had been selected to take part. It also provided an overview of what was involved in taking part in the study.

The second letter was issued on Ipsos MRBI headed paper and provided further detail on the survey process. This letter contained a respondent information sheet providing information on the household selection process, survey content, the voluntary nature of participation and support services should the respondent require help on issues relating to the problems caused by alcohol.

In advance of commencing the fieldwork, Ipsos MRBI sent a letter to Garda Headquarters to inform them of the nature of the survey and that interviewers would be working throughout the country. In addition, interviewers visited local Garda stations in the areas where they were working to inform local gardaí that they would be working in the area during a particular time period. This step ensured that gardaí could provide reassurances about interviewers visiting their area or observation of an unknown car driving around the area.

Signed consent was obtained from all participants. In providing this consent, respondents were informed that their participation in the survey was voluntary, that they were free to refuse to answer any particular question, to stop the interview at any point, and to request that all data they provided to Ipsos MRBI be destroyed.



Validation

In order to monitor progress, and calculate response rates, interviewers completed a contact sheet for each address that was issued to them. These contact sheets were prefilled with household address and sample identifier numbers for household members, and required interviewers to record details of each visit to the household and outcomes for individual household members. Completed interviews were uploaded by interviewers on a daily basis, so as to ensure that interim data files could be produced to check the quality and integrity of the data. A key element of the quality control process involved randomly selecting 10% of all assignments, contacting each household to ensure that the interview had taken place and to check whether or not the respondent had consumed alcohol in the 12 months prior to the survey, and if they consumed alcohol in the last 12 months, whether or not they had completed the self-administered questionnaire. In addition, a number of logical checks were developed by Ipsos MRBI and the Health Research Board to ensure that linked and derived variables were correct. In total, 2.5% of the last year drinkers reported that they were not honest about how much they drank or what they drank. Men (2.9%) were more likely to say that they were not completely honest about their drinking than women (2.1%).

Ethical approval

Ethical approval for the survey was obtained from the Royal College of Physicians in Ireland.

Response rates

The household response rate was 67.2% (Table 2) and the within-household response rate was 77.1%.

TABLE 2 Response rate calculation

Completed at least one interview	3,897
Unproductive address (included as refusal)	840
Refusal	1,061
Ineligible and excluded from response rate	682
Total	6,480
Total eligible households	5,798
Response rate	67.2%



A total of 5,991 interviews were achieved across the 3,897 successful households, equating to an average of 1.54 interviews per successful household. Overall, 2,208 households achieved one interview and 1,689 households achieved multiple interviews. Further analysis of the response rate (presented in Appendix 1) indicates a much lower response rate in Dublin (50.7%) compared to outside Dublin (73.1%), among men (46.8%) compared to women (53.2%) and among younger adults compared to older adults.

Weighting

The profiles of the unweighted survey sample (by age, gender and region of residence) and the Central Statistics Office (CSO) population estimates for 2013 were compared, and certain population groups were under- and over-represented in the survey sample, particularly:

- 1 An under-representation of those living in the Dublin region, with a corresponding over-representation of those in Connacht and Ulster;
- 2 An under-representation of males, particularly 18–24-year-old males; and
- 3 An under-representation of the 25–34 years age group (both males and females), with a corresponding over-representation of the over 55 years age group.

These under- and over-representations were addressed through creating a weighting factor for each respondent to ensure that the age, gender and regional distribution of the survey population mirrored the CSO population estimates for 2013.

Analysis

The data were analysed by age and gender, and by age within gender, and were presented using weighted proportions; this implies that the proportions presented cannot be calculated from the unweighted denominators. In addition, percentiles were used to describe age first consumed alcohol beyond sips and tastes. Confidence intervals of 95% were calculated for key statistics using the survey commands of Stata 13. The confidence interval calculation takes into account the effects of the weighting, stratification and clustering.

Technical bulletin

The methods are detailed in a technical bulletin prepared by Ipsos MRBI.²



FINDINGS

General patterns of alcohol consumption

Tables 3 and 4 present the frequency of alcohol consumption and the average number of drinks that drinkers consume in a typical drinking occasion. These are presented by gender and age group (Table 3) and gender by age group (Table 4).

Non-drinkers in the year prior to the survey

The rate of abstinence, defined as consuming no alcohol in the previous 12 months, was 20.6% (95% CI 19.2%–22.1%) among 18–75-year-olds (Table 3). This is marginally higher than the rate reported in the 2007 SLÁN survey (19%).¹¹ In this survey, the National Alcohol Diary Survey, women (21.9%) were more likely to be abstainers than men (19.4%), and older adults aged 65–75 years (34.8%) were more likely to abstain compared with 18–24-year-olds (13.1%). Across all age groups, with the exception of 35–49-year-olds, women were more likely than men to abstain from alcohol (Table 4 and Figure 1).

Age first consumed alcohol

The median age of commencing drinking alcohol (beyond sips and tastes) was 17 years. Five per cent of respondents who had ever consumed alcohol started to drink at or by age 14 years, 25% had started to drink at or by age 16 years, 50% by or at age 17 years, 58% consumed it before their 18th birthday or before the legal age at which alcohol consumption is permitted in Ireland. In summary, 63.9% of males and 51.4% of females were drinking alcohol before the age of 18 years. Research has shown that those who start drinking at an early age are more likely to become dependent drinkers.¹⁴

Frequency of drinking in the year prior to the survey

Seventy seven per cent (4,647) of respondents consumed alcohol in the 12 months prior to the survey. Just over one-quarter (26.1%) of all respondents reported that they consumed alcohol between two and seven times per week in the previous 12 months. Men consumed alcohol more frequently than women, with 31.5% of men reporting that they consumed alcohol at least two or more times per week (compared to 20.9% for women). Those aged 50–64 years were also more likely to consume alcohol two or more times per week (29.4%) compared to the younger and older age groups (Table 3).



Quantity of alcohol consumed per drinking occasion in the year prior to the survey

Almost one quarter (24.1%) of drinkers reported consuming 1–2 standard drinks per drinking occasion (Table 3) compared to 30% of drinkers in the 2007 SLÁN survey.¹¹ One to two standard drinks amounts to 10–20g of pure alcohol and is within the HSE's recommended low-risk daily alcohol consumption limits. Women aged 65–75 years were most likely to report consuming 1–2 standard drinks per drinking occasion (72.3%); the corresponding figure for men aged 18–24 years was 4.8% (Table 4). Previous research has shown that while Irish drinkers consume alcohol less frequently than drinkers in Europe, they consume greater volumes of alcohol per drinking occasion.¹⁵ A similar pattern was observed in this survey, particularly among younger adults; almost one-quarter (23.3%) of respondents aged 18–24 years consumed alcohol at least twice weekly and 64.3% consumed six or more standard drinks (60g of alcohol or more) on a typical drinking occasion, which equates with the criteria for risky single-occasion drinking or binge drinking. When examined by gender, 74.9% of young men (18–24) and 53.5% of young women consumed 60g of alcohol on a typical drinking occasion.

Highest number of standard drinks consumed on a single occasion

Two-thirds (67.6%) of drinkers and 80.3% of male drinkers who consumed alcohol in the last year drank six or more standard drinks on the occasion that they consumed the highest number of standard drinks in the last year.



TABLE 3 Patterns of alcohol consumption in the general population by gender and age
(unweighted n=5,991 for all respondents and 4,647 for last year drinkers)

	Gender			Age group				
	All	Male	Female	18–24	25–34	35–49	50–64	65–75
Frequency of drinking among all respondents								
Never and not in the last year	20.6%	19.4%	21.9%	13.1%	16.7%	17.3%	26.9%	34.8%
Less than monthly but at least once in the last year	15.8%	12.2%	19.3%	12.7%	15.1%	17.7%	15.6%	16.0%
1–3 times a month	21.2%	19.5%	22.8%	28.9%	28.8%	21.4%	13.6%	10.5%
Once a week	16.2%	17.3%	15.0%	21.9%	17.0%	16.2%	14.5%	10.6%
2–3 times a week	21.0%	24.9%	17.2%	21.9%	19.5%	22.6%	21.8%	17.3%
4 or more times a week	5.1%	6.6%	3.7%	1.4%	2.7%	4.8%	7.6%	10.8%
<i>Missing data or refused to answer the question</i>	0.1%	0.1%	0.1%	0.0%	0.2%	0.0%	0.1%	0.0%
Number of standard drinks per occasion among those who drank in the last year								
1–2	24.1%	15.5%	32.9%	6.4%	16.1%	25.0%	32.6%	52.4%
3–4	25.9%	21.1%	30.7%	17.2%	22.0%	30.5%	29.4%	25.6%
5–6	18.4%	17.7%	19.1%	24.7%	21.4%	16.8%	16.2%	11.3%
7–8	11.4%	14.1%	8.6%	12.9%	14.4%	10.8%	10.2%	5.6%
9 or more	19.6%	31.0%	8.0%	38.1%	25.6%	16.4%	11.1%	4.3%
<i>Missing data or refused to answer the question</i>	0.6%	0.5%	0.7%	0.8%	0.5%	0.5%	0.6%	0.8%
Proportion drinking six or more standard drinks per occasion among those who drank in the last year	41.9%	57.1%	26.4%	64.3%	52.3%	36.7%	32.3%	17.8%
Highest number of standard drinks consumed on a single occasion in the last year								
1–2	11.0%	6.0%	16.1%	3.0%	6.1%	9.0%	15.3%	34.9%
3–5	21.4%	13.7%	29.2%	11.2%	16.1%	22.4%	29.1%	30.8%
6–8	23.4%	18.9%	27.8%	18.7%	23.8%	25.7%	24.1%	19.0%
9 or more	44.2%	61.4%	26.9%	67.0%	54.0%	42.8%	31.5%	15.4%

1 standard drink = 10g of alcohol

12.6% of all respondents never drank alcohol in their lives.

20.6% (95% CI 19.2%–22.1%) of all respondents did not drink alcohol in the last year.

79.4% (95% CI 77.9%–80.8%) of all respondents drank in the last year.

87.4% (95% CI 86.0%–88.6%) of all respondents drank alcohol at some point in their lives.



TABLE 4 Patterns of alcohol consumption in the general population, gender by age group (unweighted n=5,991 for all respondents and 4,647 for last year drinkers)

	Males					Females				
	18-24	25-34	35-49	50-64	65-75	18-24	25-34	35-49	50-64	65-75
Frequency of drinking among all respondents										
Never and not in the last year	12.4%	14.9%	17.6%	24.7%	32.0%	13.9%	18.3%	17.0%	29.1%	37.5%
Less than monthly but at least once in the last year	10.8%	11.1%	14.3%	12.6%	9.2%	14.7%	18.9%	21.0%	18.5%	22.5%
1-3 times a month	28.0%	26.8%	20.5%	10.4%	9.9%	29.8%	30.6%	22.3%	16.7%	11.1%
Once a week	22.4%	17.3%	16.7%	17.3%	12.9%	21.5%	16.8%	15.7%	11.6%	8.5%
2-3 times a week	24.0%	25.3%	24.9%	25.3%	24.1%	19.9%	14.1%	20.2%	18.2%	10.7%
4 or more times a week	2.4%	4.4%	5.9%	9.7%	11.9%	0.3%	1.1%	3.7%	5.7%	9.8%
<i>Missing data or refused to answer the question</i>	0.0%	0.3%	0.0%	0.0%	0.0%	0.0%	0.3%	0.0%	0.1%	0.0%
Number of standard drinks per occasion among those who drank in the last year										
1-2	4.8%	10.2%	16.8%	19.7%	33.3%	8.2%	22.1%	33.2%	46.6%	72.3%
3-4	12.7%	14.9%	24.1%	25.7%	30.3%	21.8%	28.9%	36.9%	33.5%	20.4%
5-6	18.4%	18.0%	16.6%	18.5%	17.9%	30.8%	24.7%	16.9%	13.7%	4.7%
7-8	13.3%	14.5%	14.0%	16.2%	10.0%	12.7%	14.2%	7.6%	3.5%	1.0%
9 or more	50.6%	41.7%	28.1%	19.7%	8.0%	25.4%	9.8%	4.8%	1.9%	0.5%
<i>Missing data or refused to answer the question</i>	0.3%	0.7%	0.4%	0.2%	0.5%	1.2%	0.3%	0.5%	0.8%	1.0%
Proportion drinking six or more standard drinks per occasion among those who drank in the last year	74.9%	67.3%	53.0%	50.2%	31.2%	53.5%	37.5%	20.4%	13.0%	3.7%
Highest number of standard drinks consumed on a single occasion in the last year										
1-2	2.1%	2.6%	5.0%	8.2%	20.1%	4.0%	9.7%	13.1%	22.9%	50.3%
3-5	7.6%	9.2%	13.6%	18.6%	25.1%	15.0%	23.0%	31.2%	40.3%	36.6%
6-8	11.8%	15.9%	19.2%	23.5%	26.6%	25.7%	31.5%	32.2%	24.9%	11.0%
9 or more	78.5%	72.3%	62.2%	49.7%	28.1%	55.4%	35.8%	23.5%	11.9%	2.1%

1 standard drink = 10g of alcohol



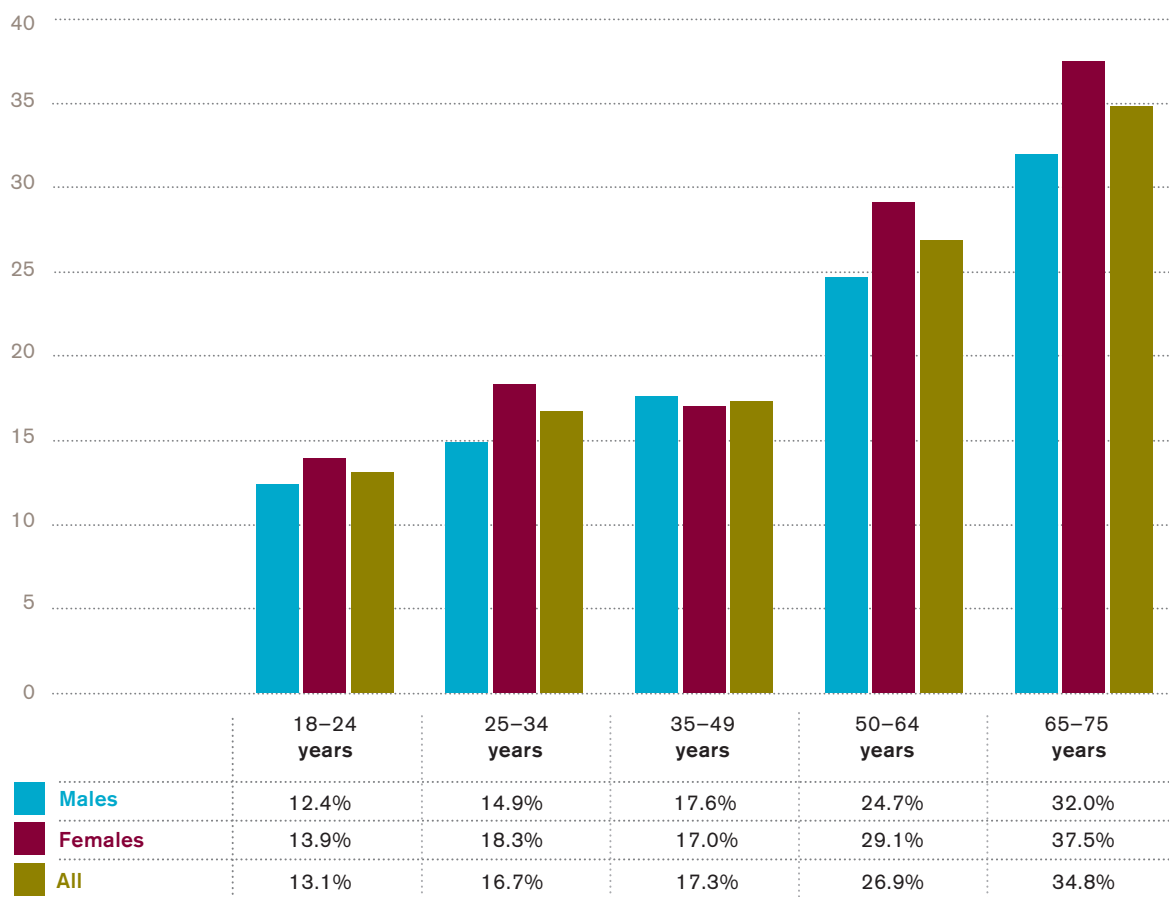


FIGURE 1 Proportion of non-drinkers in the year prior to the survey by gender and age group

Alcohol consumption in the week prior to the survey

Sixty nine per cent (n=3,187) of the those who consumed alcohol in the last year drank in the week prior this survey compared to 52% of drinkers in a similar survey in Northern Ireland in 2011.¹³

Standard drinks consumed in the week prior to the survey

The number of standard drinks consumed in the week prior to the survey is presented by male (Table 5) and female (Table 6) drinkers. These are presented by gender and age group. One-third (33.0%) of male drinkers and over one-fifth (22.8%) of female drinkers, who consumed alcohol in the week prior to the survey, drank more than the HSE’s recommended guidelines on low-risk drinking, i.e., more than 16.8 standard drinks per week for men and 11.2 standard drinks for women (Tables 5 and 6). This is higher than the comparable experience in Northern Ireland in 2011 where 26% of male drinkers and 20% of female drinkers exceeded the recommended weekly limits in the week prior to that survey.¹³ In the current survey, this measure was highest in the 18–24 years age group, with 43.8% of young men and 39.0% of young women drinking more than the recommended weekly guidelines (Figure 2).



TABLE 5 Number of standard (alcohol) drinks consumed by males in the week prior to the survey by age (unweighted n=1,650)

Number of standard drinks in the week prior to the survey	Age group					
	Males	18–24	25–34	35–49	50–64	65–75
0–16.8 or drinking within low-risk guidelines (rounded to 17 SDs in advisory guidelines)	67.0%	56.2%	61.7%	73.2%	66.9%	73.8%
16.81–40.9	26.4%	33.6%	28.9%	22.6%	27.2%	22.0%
41 or more	6.6%	10.2%	9.5%	4.3%	5.9%	4.2%

1 standard drink = 10g of alcohol

TABLE 6 Number of standard (alcohol) drinks consumed by females in the week prior to the survey by age (unweighted n=1,537)

Number of standard drinks in the week prior to the survey	Age group					
	Females	18–24	25–34	35–49	50–64	65–75
0–11.2 or drinking within low-risk guidelines (rounded to 11 SDs in advisory guidelines)	77.2%	61.0%	75.3%	80.2%	81.1%	91.6%
11.21–28.9	20.5%	35.4%	22.7%	17.2%	17.6%	5.9%
29 or more	2.3%	3.6%	2.0%	2.6%	1.3%	2.5%

1 standard drink = 10g of alcohol

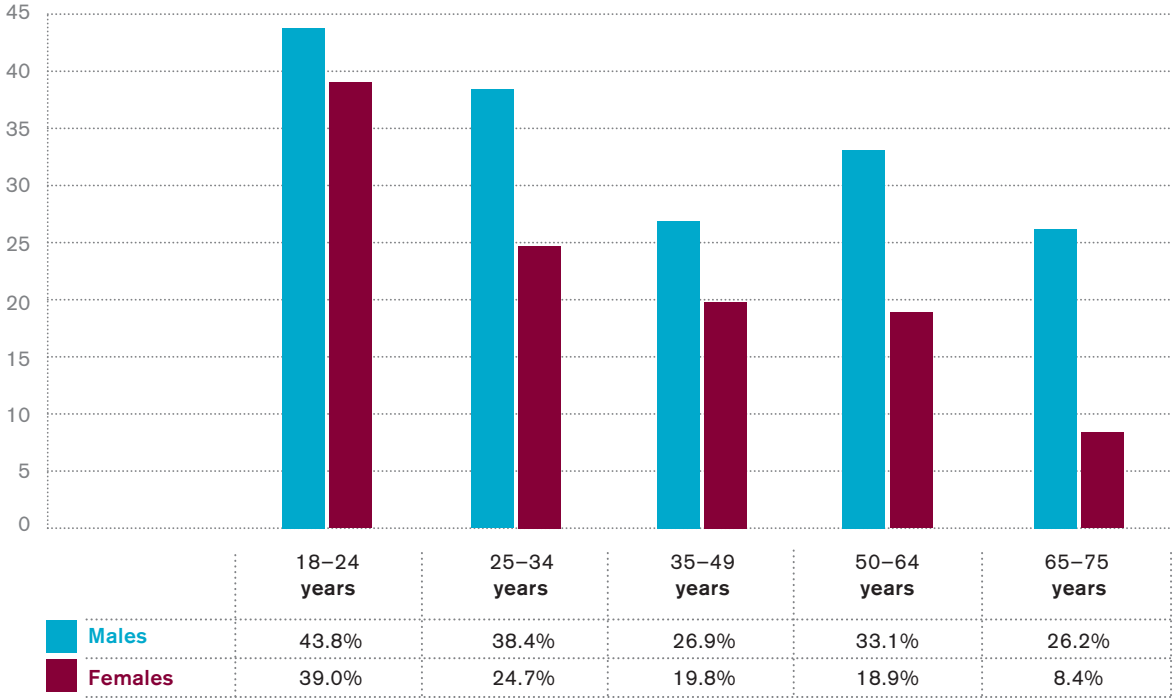


FIGURE 2 Proportion of drinkers who consumed more than the HSE's recommended low-risk drinking cut-off in the week prior to the survey



Highest number of standard drinks consumed on a single day in the week prior to the survey

The highest number of standard drinks consumed in a single day in the week prior to the survey by drinkers, men and women, is presented in Table 7. One-in-eight (12.9%) men and one-in-ten (9.1%) women drank more than the recommended weekly guidelines in a single day in the week prior to the survey. This measure was, once again, highest in the 18–24 years age group with one-in-four (27.9%) young men and one-in-five (22.5%) young women drinking more than recommended weekly guidelines in a single day (Figure 3). In addition, 60.2% of male drinkers and 34.1% of female drinkers consumed more than 60g of alcohol (six or more standard drinks) on the day when they consumed the highest amount of alcohol in the week prior to the survey. The latter finding is much higher than the comparable measure in the 2011 Northern Ireland survey which found that 35% of male drinkers and 25% of female drinkers binge drank at least once in the week prior to the survey.¹⁴

TABLE 7 Highest number of standard (alcohol) drinks consumed on a single day in the week prior to the survey, by gender and gender by age group (unweighted n=3,187)

Number of standard drinks in the week prior to the survey	Males						Females					
	Males	Females	18–24	25–34	35–49	50–64	65–75	18–24	25–34	35–49	50–64	65–75
0–2	16.0%	34.8%	8.4%	11.5%	18.0%	16.6%	28.6%	14.2%	24.9%	37.7%	45.1%	63.2%
3–5	23.9%	31.2%	11.1%	17.6%	28.7%	26.2%	35.7%	24.8%	30.6%	33.5%	32.8%	29.9%
6–11.2 [†]	28.7%	25.0%	27.0%	28.4%	26.7%	32.7%	28.0%	38.5%	32.1%	23.1%	17.9%	6.0%
11.21–16.8 [‡]	18.6%	7.0%	25.7%	23.2%	16.8%	18.3%	4.2%	16.5%	9.2%	4.7%	3.2%	0.9%
16.81 or more	12.9%	2.1%	27.9%	19.3%	9.8%	6.2%	3.6%	6.0%	3.2%	1.0%	1.0%	0.0%

¹ standard drink = 10g of alcohol

[†]0–11.2 (rounded to 11 SDs in advisory guidelines) is low-risk drinking for women 18 years and over

[‡]0–16.8 (rounded to 17 SDs in advisory guidelines) is low-risk drinking for men 18 years and over



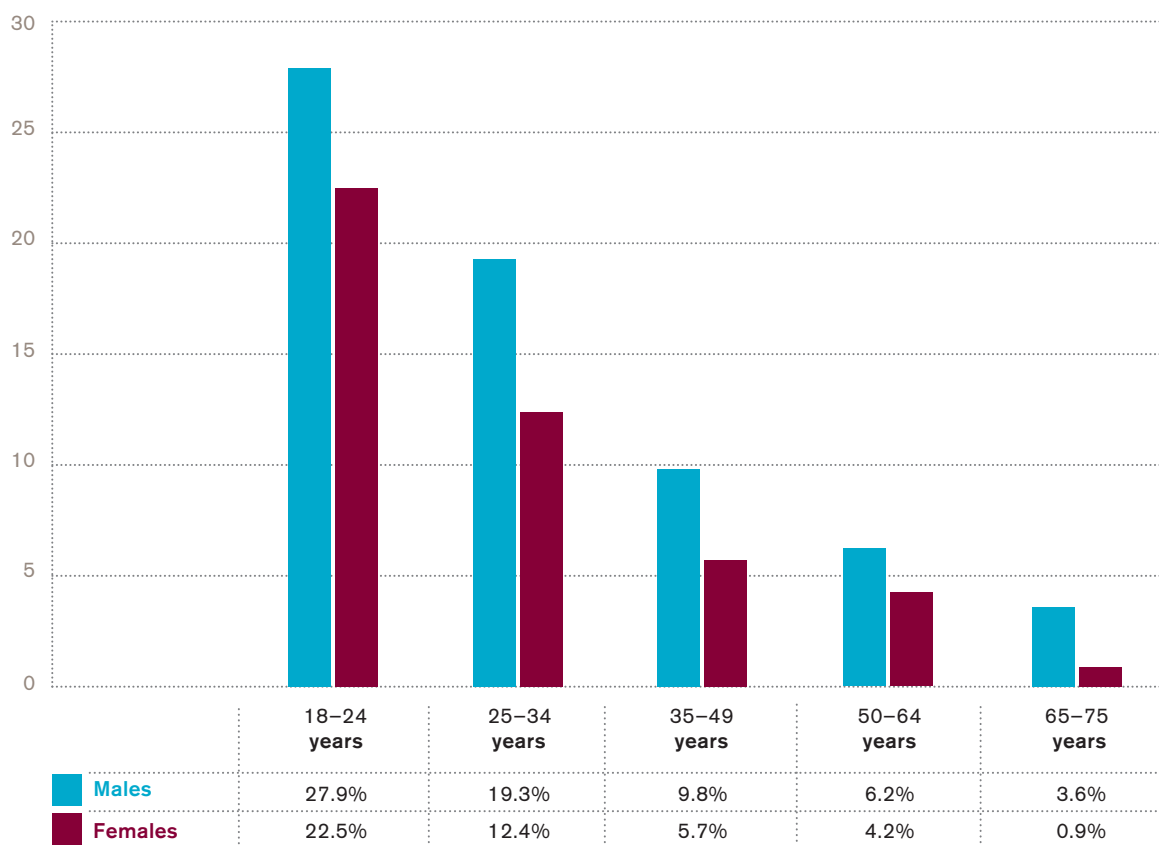


FIGURE 3 Proportion of drinkers who consumed more than their weekly recommended limits in a single day in the week prior to the survey

Type of alcohol consumed in the week prior to the survey

Tables 8 and 9 present the type of alcohol consumed in the week prior to the survey by gender and age group, and gender by age group for the four more common drinks. Overall, beer was the most common type of alcohol consumed in the week prior to the survey, with 54% of weekly drinkers consuming it. Beer was the most common type of alcohol consumed by men of all age groups (76.7%) (Table 9 and Figure 4); wine was the most common type of alcohol consumed by women over 25 years (58.9%) (Table 9 and Figure 5); and spirits were the most common type of alcohol consumed by young women aged 18–24 years (59.9%) (Table 9 and Figure 6). Cider was consumed by more than one-in-five young adults (22.5%). Alcopops were consumed by women and young adults. In the 2011 Northern Ireland survey, wine (48%) followed closely by beer (47%) were found to be the more common drinks consumed.¹⁴



TABLE 8 Type of alcohol consumed in the week prior to the survey by gender and age group (unweighted n=3,187)

Type of alcohol consumed in the week prior to the survey	Gender			Age group				
	All	Male	Female	18–24	25–34	35–49	50–64	65–75
Beer/lager/stout/ale	54.0%	76.7%	27.3%	54.0%	59.0%	54.4%	52.9%	42.5%
Wine	42.0%	27.8%	58.9%	17.6%	37.0%	50.8%	47.2%	48.1%
Spirits	23.2%	17.4%	30.1%	49.2%	25.8%	12.9%	18.3%	26.7%
Cider	9.5%	9.7%	9.3%	22.5%	12.3%	7.3%	5.2%	1.0%
Alcopops	2.8%	0.6%	5.2%	7.1%	4.1%	1.8%	1.1%	0.3%
Champagne/prosecco	1.9%	1.0%	3.1%	1.8%	3.0%	1.3%	2.1%	1.4%
Cream liqueurs	0.9%	0.5%	1.3%	0.2%	0.9%	0.8%	1.3%	1.0%
Port	0.4%	0.4%	0.5%	0.0%	0.7%	0.3%	0.7%	0.3%
Sherry/martini/vermouth	0.4%	0.3%	0.5%	0.2%	0.5%	0.4%	0.4%	0.7%
Buckfast/fortified wine	0.2%	0.2%	0.2%	0.2%	0.3%	0.2%	0.3%	0.0%
Shandy	0.6%	0.8%	0.5%	0.0%	0.7%	0.2%	1.1%	2.1%

TABLE 9 Type of alcohol consumed in the week prior to the survey, gender by age group (unweighted n=3,187)

Type of alcohol consumed in the week prior to the survey	Male					Female				
	18–24	25–34	35–49	50–64	65–75	18–24	25–34	35–49	50–64	65–75
Beer/lager/stout/ale	77.4%	78.9%	77.1%	77.3%	67.3%	30.5%	35.5%	28.7%	20.9%	8.3%
Wine	9.7%	24.3%	33.0%	31.4%	34.5%	25.6%	52.0%	71.0%	67.8%	67.2%
Spirits	38.5%	21.8%	8.0%	12.6%	21.4%	59.9%	30.4%	18.4%	25.6%	33.6%
Cider	19.0%	11.4%	9.6%	6.7%	1.8%	26.1%	13.4%	4.8%	3.2%	0.8%



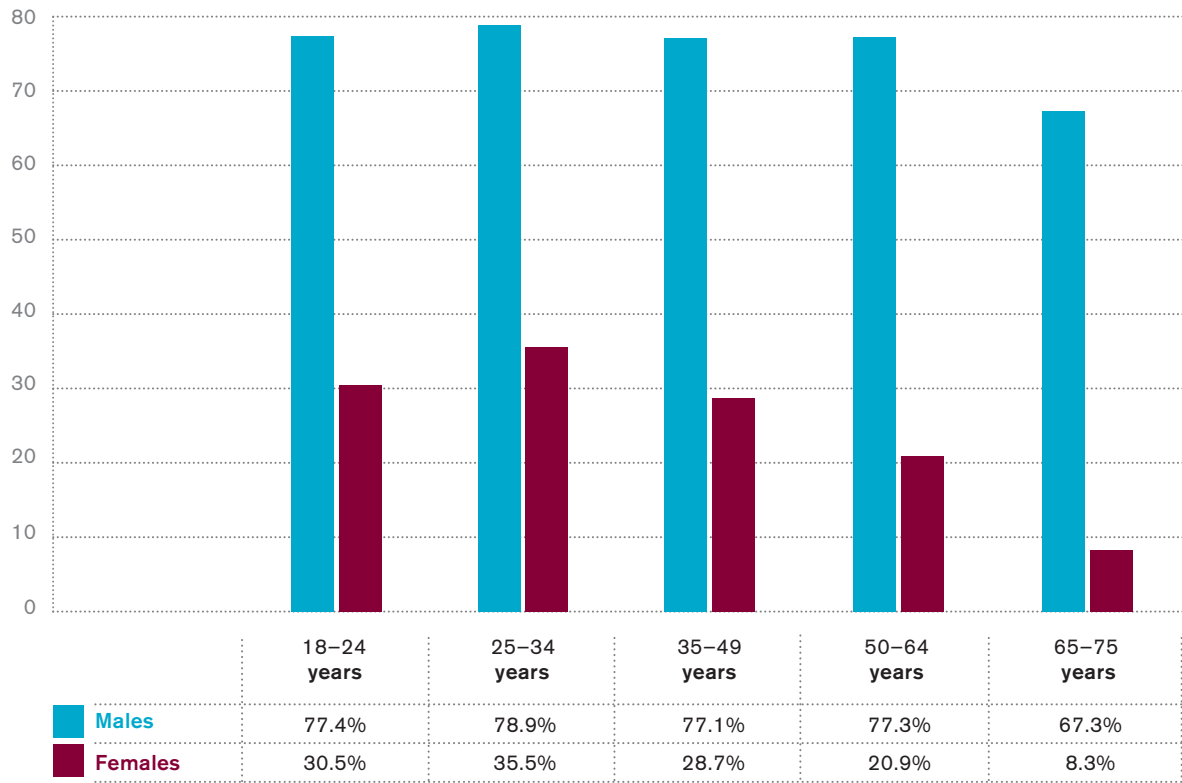


FIGURE 4 Proportion consuming beer in the week prior to the survey by gender and age group

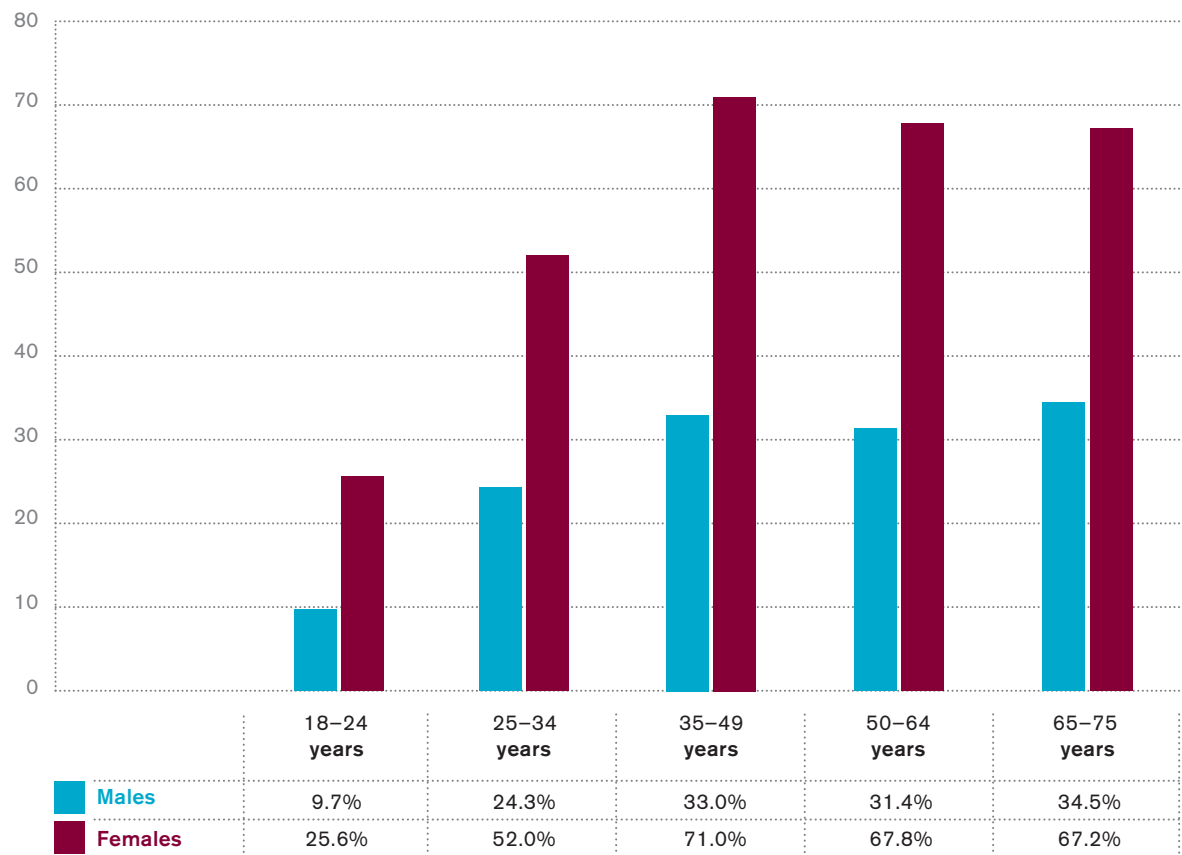


FIGURE 5 Proportion consuming wine in the week prior to the survey by gender and age group



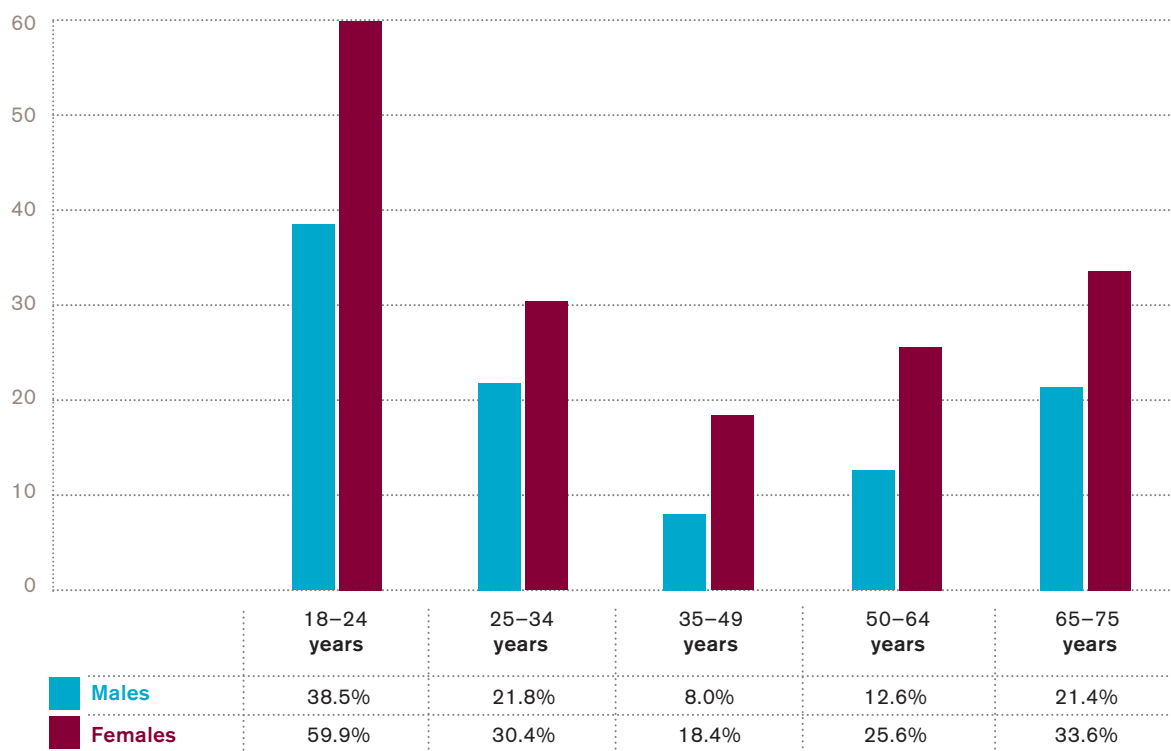


FIGURE 6 Proportion consuming spirits in the week prior to the survey by gender and age group

Drinking context in the week prior to the survey

Place where alcohol was consumed in the week prior to the survey

Table 10 presents the locations where alcohol was consumed in the week prior to the survey by gender and age group. The preferred drinking venues for people over 25 years old in the week prior to the survey was at their own or someone else's home (60–69%), while pubs, bars or nightclubs were the preferred venues for young people (72.3%).

TABLE 10 Locations where alcohol was consumed in the week prior to the survey by gender and age (unweighted n=3,187)

Place where alcohol was consumed in the week prior to the survey	All	Gender		Age group				
		Male	Female	18–24	25–34	35–49	50–64	65–75
Own home/someone else's home	64.8%	59.5%	71.0%	64.8%	65.1%	68.9%	60.1%	61.0%
Pub/nightclub/disco bar	47.4%	55.3%	38.1%	72.3%	52.4%	37.3%	46.4%	35.9%
Hotel/restaurant	17.9%	15.0%	21.3%	9.4%	19.6%	17.7%	20.0%	22.3%
Other <i>for example, sports event, whilst traveling, outdoor venue and holiday</i>	9.0%	10.2%	7.5%	8.9%	8.4%	8.8%	9.8%	9.4%

Days on which alcohol was consumed in the week prior to the survey

Table 11 presents the days on which alcohol was consumed in the week prior to the survey by gender and age group. More people consumed alcohol on the weekend days (Friday to Sunday)

than on the weekdays (Monday to Thursday) and the same trend was observed for men and women and all age groups. Over half (57.5%) of drinkers drank on Saturday night, while only a small proportion (13.9%) drank on a Tuesday night. The proportions drinking on a Thursday night are higher for those aged 18–64 years than the proportions drinking on Monday, Tuesday or Wednesday nights.

TABLE 11 Days on which alcohol consumption occurred in the week prior to the survey by gender and age (unweighted n=3,187)

Days on which alcohol was consumed in the week prior to the survey	Gender			Age group				
	All	Male	Female	18–24	25–34	35–49	50–64	65–75
Monday	16.2%	18.2%	13.8%	15.1%	13.9%	14.2%	17.3%	28.6%
Tuesday	13.9%	15.5%	11.9%	12.9%	10.3%	9.8%	19.1%	26.1%
Wednesday	17.1%	19.5%	14.3%	14.3%	12.8%	15.1%	20.1%	32.4%
Thursday	19.4%	21.7%	16.6%	20.8%	15.7%	16.5%	21.9%	31.0%
Friday	39.2%	39.8%	38.4%	31.2%	40.4%	40.7%	39.6%	41.5%
Saturday	57.5%	58.1%	56.8%	53.3%	56.0%	60.7%	59.4%	51.6%
Sunday	42.2%	45.6%	38.0%	22.9%	40.8%	41.7%	48.7%	61.0%

Place where and days on which alcohol was consumed in the week prior to the survey

Table 12 presents the most popular drinking locations for each day in the week prior to the survey. More people consumed alcohol at their own or at someone else’s home than in any other location. There was a small increase in the proportion who drank in pubs, bars or nightclubs at the weekend and a corresponding decrease in the proportion who drank in the home at the weekend. For example, on a Tuesday night 29.4% drank in a pub, nightclub or bar and 50.4% drank at home or in someone else’s home, while on a Saturday night 34.5% drank in a pub, nightclub or bar and 45.6% drank at home or in someone else’s home.

TABLE 12 Most popular drinking locations for each day of the week (unweighted n=3,187)

Rank	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Own home/someone else’s home	50.1%	50.4%	48.1%	44.8%	48.3%	45.6%	46.3%
Pub/nightclub/disco bar	29.1%	29.4%	28.5%	29.6%	29.5%	34.5%	33.3%
Hotel/restaurant	13.9%	13.0%	16.3%	16.7%	14.5%	12.6%	13.1%
Other	6.8%	7.2%	7.1%	8.9%	7.6%	7.3%	7.3%



With whom alcohol was consumed in the week prior to the survey

Table 13 presents who people consumed alcohol with in the week prior to the survey. Almost 6% of people consumed alcohol alone on each drinking occasion during the week prior to the survey; 7.0% of men and 4.6% of women drank alone. The proportion who consumed alcohol alone on each drinking occasion increased incrementally with age, with 1.8% of 18–24-year-olds drinking alone compared to 11.8% of 65–75-year-olds (Figure 7).

TABLE 13 Alcohol consumption on own or with others by age and gender
(unweighted n=3,187)

Who did you drink alcohol with during the week?	Gender			Age group				
	All	Male	Female	18–24	25–34	35–49	50–64	65–75
On my own for the week	5.9%	7.0%	4.6%	1.8%	2.7%	5.8%	9.6%	11.8%
On my own for part of the week and with others for the remainder	8.3%	10.3%	6.0%	2.4%	9.3%	8.9%	9.2%	10.4%
With others for the week	85.7%	82.6%	89.4%	95.3%	88.0%	85.2%	81.2%	77.8%

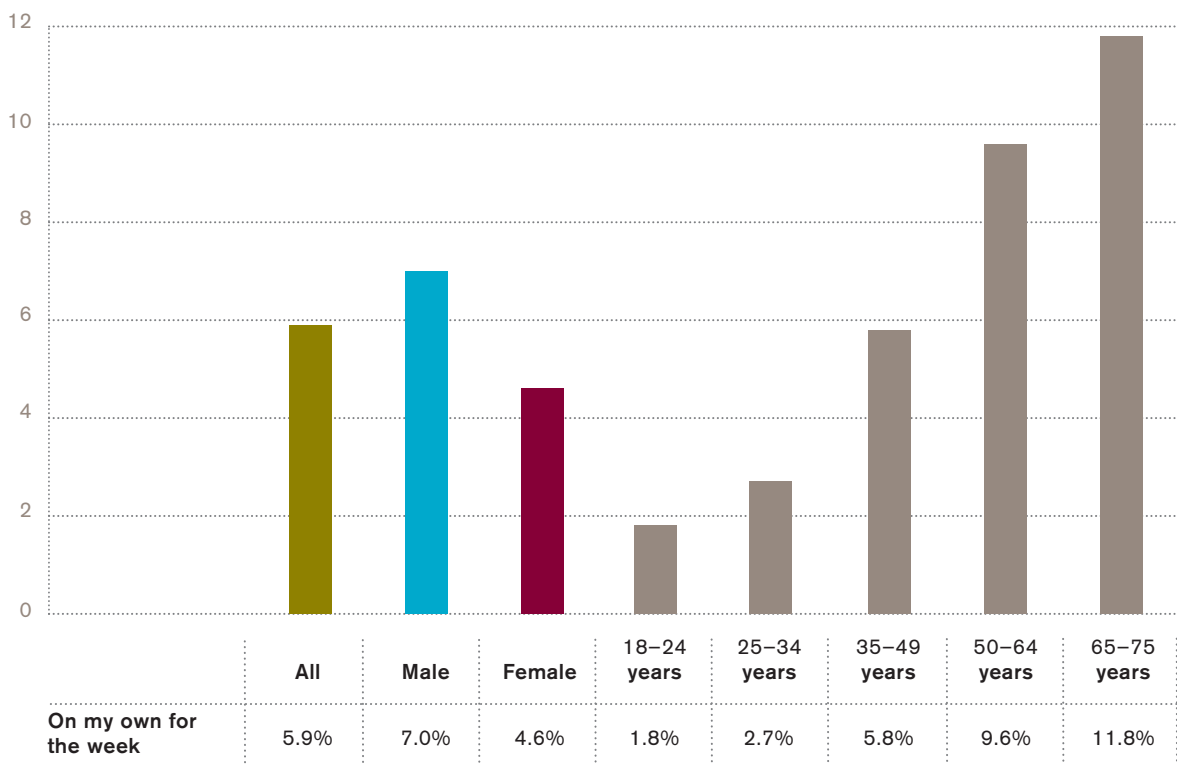


FIGURE 7 Proportion of drinkers who always consumed alcohol alone in the week prior to the survey

Spend on alcohol in the week prior to the survey

Expenditure on alcohol consumed in the week prior to the survey

Table 14 presents the total spend (in euro) on alcohol in the week prior to the survey by gender and age. One-in-eight (12.1%) people who consumed alcohol in the week prior to the survey spent €60 or more on alcohol in that week (Figure 8). More men than women spent €60 or more on alcohol. People under 35 were more likely to spend €60 or more on alcohol than their older counterparts.

TABLE 14 Total spend (in euro) on alcohol in the week prior to the survey by gender and age (unweighted n=3,187)

Amount spent on alcohol in the week prior to the survey	Gender			Age group				
	All	Male	Female	18–24	25–34	35–49	50–64	65–75
No money spent	8.9%	5.4%	12.9%	5.1%	6.7%	8.1%	11.8%	15.6%
Less than €1	0.3%	0.2%	0.5%	0.9%	0.4%	0.2%	0.1%	0.3%
€1 to less than €15	34.6%	30.9%	38.9%	24.9%	30.0%	42.6%	32.7%	36.5%
€15 to less than €30	24.0%	24.6%	23.2%	25.4%	25.0%	22.9%	25.2%	20.1%
€30 to less than €45	13.1%	14.8%	11.1%	18.7%	15.4%	10.0%	12.5%	11.1%
€45 to less than €60	7.0%	8.3%	5.5%	8.5%	8.0%	6.0%	7.4%	4.9%
€60 to less than €75	3.9%	4.7%	3.0%	5.3%	4.9%	3.3%	3.1%	3.8%
€75 or more	8.2%	11.1%	4.9%	11.1%	9.7%	6.8%	7.2%	7.6%

Table 15 presents the total spend (in euro) on alcohol in the week prior to the survey by gender and by age.



TABLE 15 Total spend (in euro) on alcohol in the week prior to the survey, gender by age (unweighted n=3,187)

Amount spent on alcohol in the week prior to the survey	Males					Females				
	18-24	25-34	35-49	50-64	65-75	18-24	25-34	35-49	50-64	65-75
None	4.9%	3.4%	5.2%	7.4%	7.7%	5.8%	10.5%	11.7%	17.5%	26.9%
Less than €1	0.4%	0.0%	0.2%	0.2%	0.0%	0.9%	0.9%	0.2%	0.0%	0.8%
€1 to less than €15	21.7%	28.3%	38.6%	27.2%	32.1%	28.3%	31.9%	47.1%	39.6%	42.9%
€15 to less than €30	21.2%	22.9%	25.4%	26.2%	26.2%	29.6%	27.1%	19.9%	24.0%	11.8%
€30 to less than €45	17.7%	17.3%	11.6%	15.3%	14.9%	19.7%	13.1%	8.2%	8.8%	5.9%
€45 to less than €60	10.2%	8.3%	7.5%	9.4%	5.4%	6.7%	7.7%	4.4%	4.9%	4.2%
€60 to less than €75	8.4%	5.6%	3.6%	3.7%	4.2%	2.2%	4.3%	3.0%	2.3%	2.5%
€75 or more	15.5%	14.1%	8.0%	10.4%	9.5%	6.7%	4.6%	5.4%	2.9%	5.0%

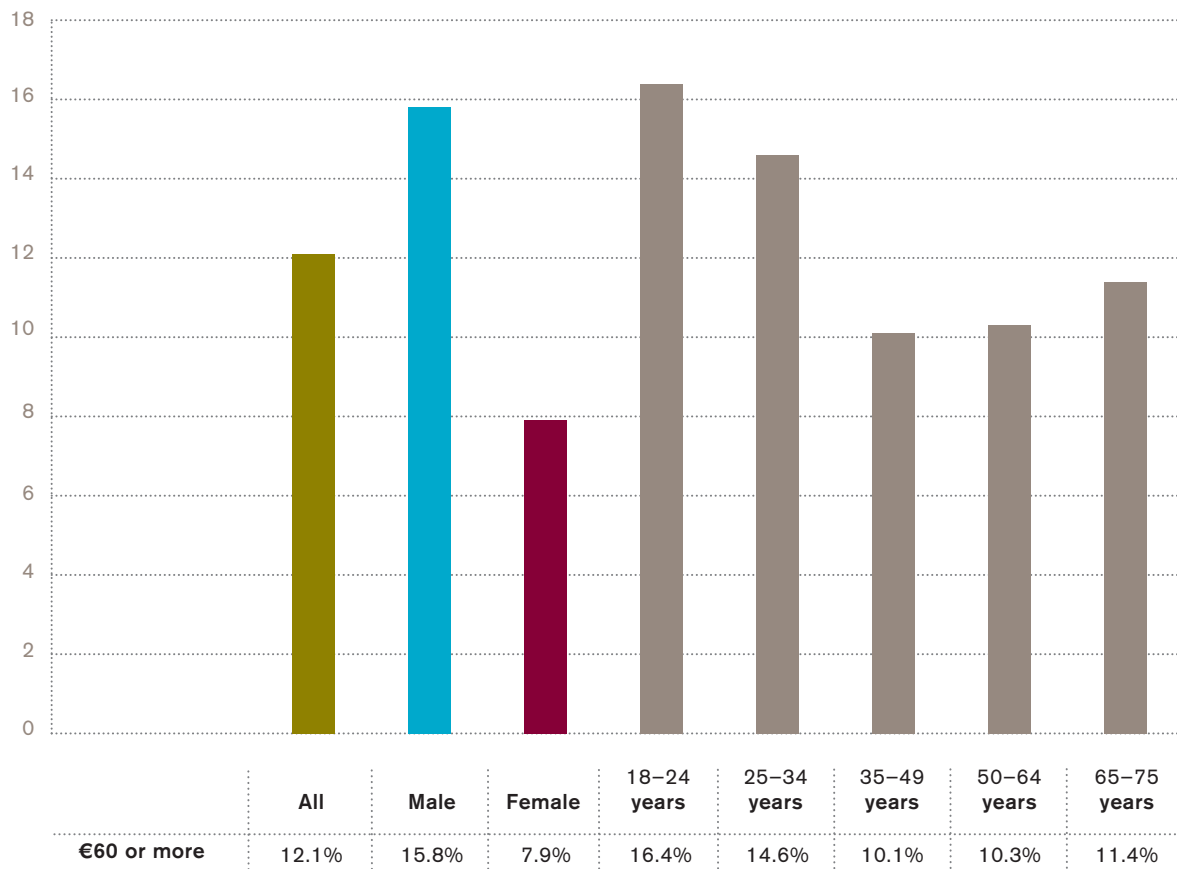


FIGURE 8 Proportion of drinkers who spent €60 or more on alcohol in the week prior to the survey



Number of standard drinks consumed and expenditure on alcohol by location in the week prior to the survey

Table 16 presents the number of standard drinks consumed in the week prior to the survey by location, the total spend on alcohol and the average price of a standard drink. The highest number of standard drinks were consumed at home (17,646, 42.7%), followed closely by the number of standard drinks consumed in a pub, nightclub or disco bar (17,251, 41.7%).

A smaller number of standard drinks were consumed in a hotel or restaurant (4,313, 10.4%). In total, €96,267 was spent by survey respondents on alcohol in the week prior to the survey. The survey respondents represent 0.19% of the adult population aged 18–75 years, and when this experience is applied to the adult population in Ireland, the spend was approximately €50,667,111 in that week. Just below 60% of expenditure was spent in on-trade facilities and 35% was spent in off-trade facilities. The average price of a standard drink is highest in hotels or restaurants (at €4.58) and lowest at home or in someone else’s home (at €2.76). *These self-reported prices do not include alcohol consumed by others; rather they include alcohol purchased by the respondent, which may explain the high price of each standard drink consumed at home.*

TABLE 16 Number of standard drinks consumed in the week prior to the survey by location, the total spend on alcohol by location and the average price of a standard drink by location (unweighted n=3,187)

	Total number of standard drinks consumed	Total spend on alcohol	Average cost in euro per standard drink
Pub/night club/disco bar	17,251 (41.7%)	€43,236.20 (44.9%)	€2.98
Hotel/restaurant	4,313 (10.4%)	€14,027.93 (14.6%)	€4.58
Own home/someone else’s home	17,646 (42.7%)	€33,566.14 (34.9%)	€2.76
Other <i>for example, sports event, whilst traveling, outdoor venue and holiday</i>	2,143 (5.2%)	€5,437.24 (5.6%)	€3.10
Total	41,352	€96,267.51	€2.91

1 standard drink = 10g of alcohol



Harmful drinking patterns in the year prior to the survey

Both a person's overall volume of alcohol consumption and their pattern of drinking are important determinants of alcohol-related harm. In general, increases in overall consumption are accompanied by a greater incidence of health and social problems. Volume of consumption as well as patterns of drinking, especially risky single-occasion drinking (RSOD) more commonly known as binge drinking, determine the burden of disease caused by alcohol. For example, all-cause mortality in male drinkers consuming less than two drinks per day is about twice as high if they also have occasional heavy drinking episodes.¹⁶ There are a number of internationally agreed methods to measure harmful drinking patterns. These include monthly RSOD, which is defined as six or more standard drinks on a single occasion one or more times a month in the last year. The World Health Organization's Audit-C screening tool also measures harmful drinking, and those with a score of five or more are classified as harmful drinkers (Table 17). Tables 17 and 18 present the frequency of RSOD, the rate of harmful alcohol use and the rate of alcohol dependence reported by Irish drinkers aged 18–75 years. These are presented by gender and age group (Table 17) and gender by age group (Table 18).

Risky single-occasion drinking (RSOD) or binge drinking

Almost two-fifths (37.3%) of all respondents consumed six or more standard drinks on a single occasion one or more times a month in the last year. This practice is known as risky single-occasion drinking or binge drinking (Table 17). One-in-five (21.1%) Irish drinkers engaged in RSOD at least once a week. The latter finding is lower than the finding in the 2007 SLÁN survey, where 28% were found to engage in RSOD at least once per week, and it suggests that consumption has decreased since the economic downturn, due to less disposable income, thus indicating that price and disposable income does influence drinking patterns.¹¹ Monthly binge drinking was most common among males aged 18–24 years (67.8%) and least common among women aged 65–75 years (5.3%) (Table 18 and Figure 9). Overall, women were less likely than men to consume alcohol in this manner (33.9% vs. 50.5%) (Figure 9); 52.6% of young women aged 18–24 years engaged in weekly RSOD, however, which is worrying, given their reduced ability to metabolise alcohol and their increased susceptibility to tissue damage arising from alcohol consumption.

Harmful drinking

More than half, 54.3% (95% CI 52.5-56.1) of 18–75-year-old drinkers were classified as harmful drinkers using the World Health Organization's AUDIT-C screening tool (Table 17 and Figure 10). These results are similar to those in the SLÁN 2007 survey, where 56% of all adult drinkers were found to have a positive AUDIT-C score.¹¹ When the proportion of survey respondents who were classified as harmful drinkers is applied to the population, this equates with between 1.3 and 1.4 million harmful drinkers. Harmful drinking was more



common among men (69.5%) than women (38.9%) and more common among 18–24-year-olds (74.7%) than 65–75-year-olds (33.8%). Given the proportion of drinkers who consume alcohol in a harmful manner, one may conclude that harmful drinking is the norm in Ireland.

Dependence

Among Irish drinkers aged 18–75 years, 6.9% (95% CI 6.0–7.9) scored positive for dependence, using the DSM-IV criteria, which is a set of criteria for measuring dependence and is the gold standard for identifying dependence in a clinical setting.⁹ This indicates that there were somewhere between 149,300 and 203,897 dependent drinkers in Ireland in 2013. Dependence was most common in 18–24-year-olds (14.7%) and least common among 65–75-year-olds (2.2%). Similar to the trends for RSOD and harmful drinking, the 18–24 years age group showed the least gender difference (16.9% of males and 12.5% of females scored positive for dependence using the DSM-IV) when compared with other age groups (Table 18 and Figure 11).

TABLE 17 Patterns of harmful and dependent alcohol consumption in the population who consumed in the year prior to the survey by gender and age (unweighted n=4,647)

	Gender			Age group				
	All	Male	Female	18–24	25–34	35–49	50–64	65–75
Frequency of risky single-occasion drinking (binge) in the last year								
Never	31.0%	18.7%	43.5%	12.5%	21.9%	30.7%	41.8%	62.6%
Less than monthly	31.7%	30.8%	32.6%	27.3%	34.4%	37.5%	27.8%	18.5%
1–3 times a month	16.2%	20.1%	12.2%	27.9%	21.1%	14.1%	9.9%	6.4%
Once a week or more	21.1%	30.4%	11.7%	32.2%	22.5%	17.7%	20.5%	12.6%
Harmful drinking among those who drank in the last year								
RSOD (binge drinking) monthly	37.3 95% CI 35.5–39.2	50.5%	24.0%	60.2%	43.6%	31.9%	30.4%	18.9%
AUDIT-C score of 5 or more	54.3 95% CI 52.5–56.1	69.5%	38.9%	74.7%	61.1%	51.5%	45.5%	33.8%
Dependent drinking among those who drank in the last year								
DSM-IV score of 3 or more	6.9 95% CI 6.0–7.9	9.3%	4.4%	14.7%	11.5%	3.5%	3.3%	2.2%

1 standard drink = 10g of alcohol



TABLE 18 Patterns of harmful and dependent alcohol consumption in the population who consumed in the year prior to the survey, gender by age group (unweighted n=4,647)

	Males					Females				
	18-24	25-34	35-49	50-64	65-75	18-24	25-34	35-49	50-64	65-75
Frequency of risky single-occasion drinking (binge) in the last year										
Never	8.4%	10.9%	18.7%	24.2%	43.5%	16.6%	32.9%	42.6%	60.4%	82.2%
Less than monthly	23.8%	31.0%	36.5%	29.1%	24.5%	30.8%	37.7%	38.4%	26.5%	12.6%
1-3 times a month	30.1%	26.2%	17.9%	13.8%	11.0%	25.7%	16.0%	10.4%	5.6%	2.1%
Once a week or more	37.7%	31.9%	26.8%	32.9%	21.0%	26.9%	13.4%	8.6%	7.5%	3.1%
Harmful drinking among those who drank in the last year										
RSOD (binge drinking) monthly	67.8%	58.0%	44.8%	46.7%	32.0%	52.6%	29.5%	19.0%	13.1%	5.3%
AUDIT-C score of 5 or more	82.8%	76.3%	66.6%	63.9%	52.8%	66.4%	46.0%	36.4%	25.8%	13.3%
Dependent drinking among those who drank in the last year										
DSM-IV score of 3 or more	16.9%	16.4%	5.5%	4.2%	3.9%	12.5%	6.7%	1.6%	2.5%	0.6%

1 standard drink = 10g of alcohol

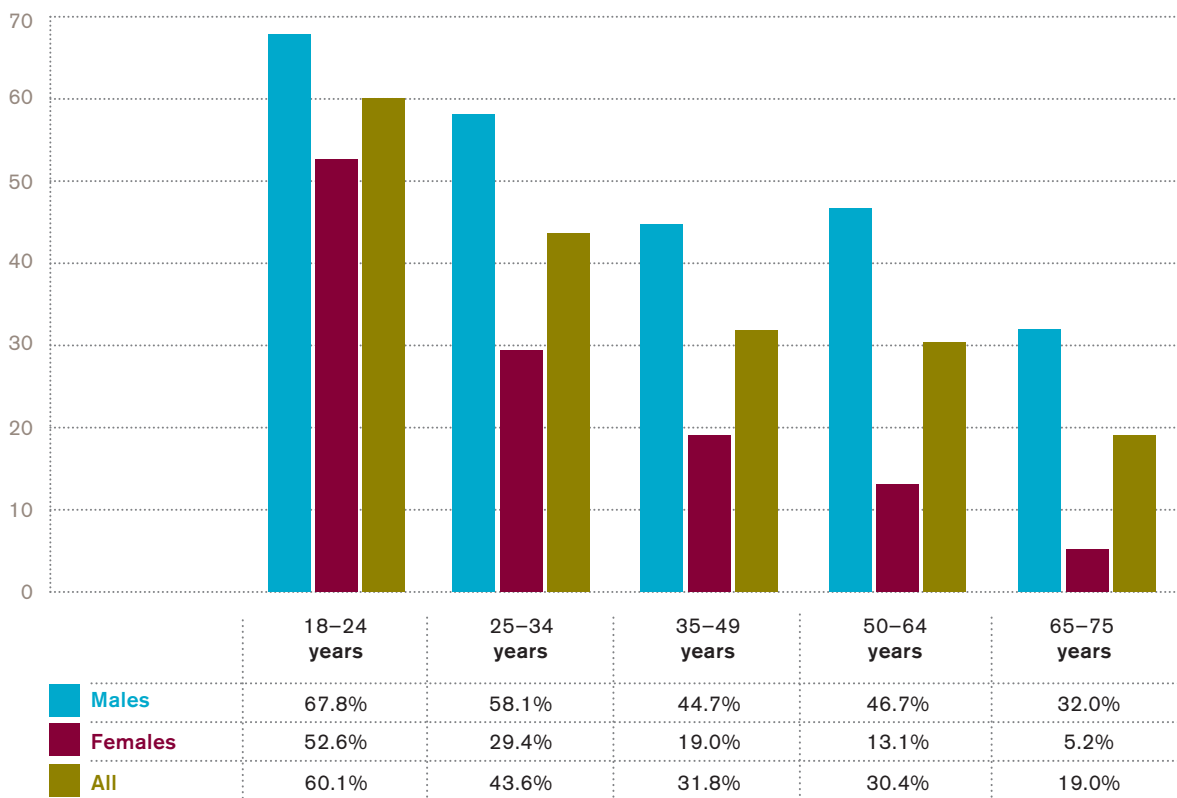


FIGURE 9 Proportion of drinkers who engaged in monthly RSOD in the previous 12 months by gender and age group

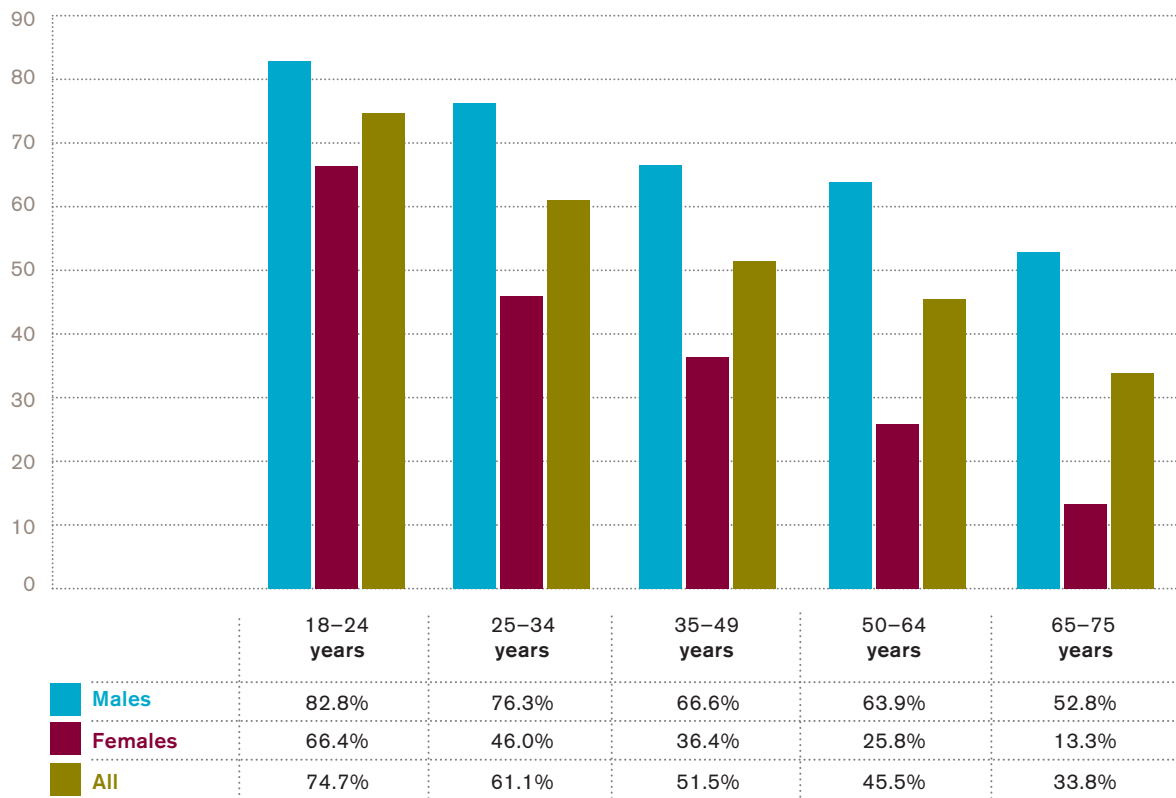


FIGURE 10 Proportion of drinkers with a positive AUDIT-C score and are classified as harmful drinkers by gender and age group

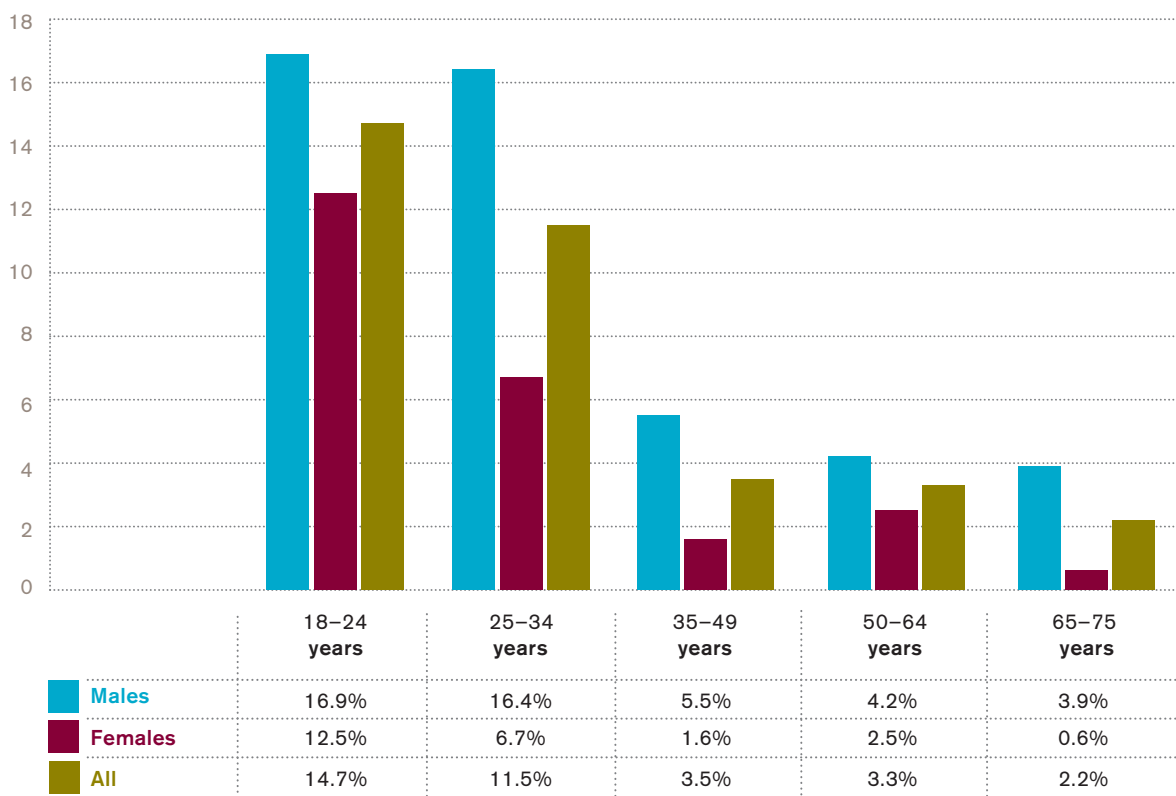


FIGURE 11 Proportion of drinkers who scored positive using DSM-IV and are classified as dependent drinkers by gender and age group



Alcohol-related harms in the year prior to the survey

The likelihood of a person experiencing alcohol-related harm depends on both their overall volume of alcohol consumption and the pattern in which they drink. Alcohol-related harm is not confined to the minority of heaviest drinkers in the population; in reality, it is the much greater number of drinkers in a population who engage in RSOD that accounts for much of the acute alcohol-related problems, such as aggression, violence, injuries, poor work performance and poisoning.

Alcohol-related harm is not restricted to the individual drinker; it has negative consequences for families, friends and bystanders. Such negative consequences include family problems, public disturbances, violence and reduced work-related performance. Recent research from Australia has demonstrated that the range and magnitude of alcohol's harm to others is considerable.¹⁷

Negative consequences experienced by the drinker's own alcohol consumption

Tables 19 and 20 present the proportion of current drinkers who reported that they experienced negative consequences as a result of their own drinking in the previous 12 months. These are presented by gender and age group (Table 19) and gender by age group (Table 20). The overall prevalence of drinkers experiencing at least one of the eight harms as a result of their own alcohol use was 29.9%, with men 1.5 times more likely than women to report harms (men 35.7%, women 24.1%). The experience of at least one alcohol-related harm as a result of their own drinking was highest among 18–24 year-olds (at 56%) and decreased with increasing age. Male drinkers were more likely than female drinkers to experience each of the harms. With the exception of harm to home life or marriage, the 18–24-years age group were more likely than older adults to experience all other harms. Almost 30% of men and around 20% of women in the 18–24 years age group reported that they experienced harm to their work or study in the previous year and similar proportions experienced harm to their health. Young males aged 18–24 years were the group most likely to experience acute consequences such as being involved in fights (23.0%) and being in an accident (14.5%). Last year drinkers who binge drink, when compared to drinkers who did not binge, were between two and three times more likely to experience each of the eight harms from their own drinking (Table 21).

Negative consequences experienced by others besides the drinker

Tables 19 and 20 present the proportion of respondents (including non-drinkers) who experienced negative consequences as a result of someone else's drinking in the previous 12 months. These are presented by gender and age group (Table 19) and gender by age group (Table 20). The overall prevalence of experiencing at least one of the five harms as a result of someone else's alcohol use was 17.1%, with little difference between men's (18%) and



women’s experience (15.6%). The experience of one or more alcohol-related harms, as a result of others’ drinking, decreased somewhat with age. Males were more likely to be assaulted, and be a passenger with a drunk driver. Females were more likely to experience family problems arising from someone else’s drinking (Tables 19 and 20).

One-in-six (16.4%) males aged 18–24 years were assaulted in the previous 12 months (Table 20). Males aged 18–24 years were also the group most likely to have been a passenger with a drunk driver (9.3%). Females aged 25–34 years were most likely to have experienced family problems (12.3%) and females aged 18–24 years were most likely to have had their property vandalised (8.6%).

TABLE 19 Negative consequences from alcohol consumption in the year prior to the survey by gender and age

	Gender			Age group				
	All	Male	Female	18–24	25–34	35–49	50–64	65–75
Consequences in the last year from own drinking (unweighted n=4,647)								
Harm to your finances	20.3%	24.6%	15.9%	38.8%	26.1%	14.7%	13.9%	8.7%
Harm to your health	16.4%	19.9%	13.0%	24.8%	19.4%	13.7%	13.5%	11.2%
Harm to your work/study	10.4%	11.8%	9.1%	26.1%	10.8%	6.1%	8.1%	5.9%
Harm to friendship or social life	10.1%	11.1%	9.2%	17.1%	12.2%	7.6%	8.0%	7.0%
Harm to your home life or marriage	9.4%	11.2%	7.6%	8.6%	11.2%	8.9%	9.2%	7.8%
Been in a physical fight	9.0%	11.6%	6.3%	17.7%	11.8%	5.3%	6.9%	5.6%
Been in accident	7.0%	8.1%	5.9%	12.8%	7.8%	4.5%	6.4%	6.1%
Stopped by police	6.3%	7.6%	5.0%	11.8%	7.1%	3.7%	6.2%	5.6%
Consequences in the last year from others’ drinking (unweighted n=5,991)								
Family problems	7.3%	6.0%	8.6%	7.7%	10.5%	6.6%	6.5%	3.8%
Passenger with drunk driver	5.2%	6.2%	4.2%	8.8%	8.4%	3.8%	3.5%	1.7%
Had property vandalised	4.9%	5.0%	4.9%	8.0%	6.1%	4.5%	3.8%	2.5%
Assaulted by person who had been drinking	4.9%	6.7%	3.1%	12.5%	7.7%	2.9%	2.3%	0.8%
Money problems	2.3%	2.2%	2.4%	2.1%	3.1%	2.3%	2.1%	1.3%



TABLE 20 Negative consequences from alcohol consumption in the year prior to the survey, gender by age group

	Males					Females				
	18-24	25-34	35-49	50-64	65-75	18-24	25-34	35-49	50-64	65-75
Consequences in the last year from own drinking (unweighted n=4,647)										
Harm to your finances	43.5%	33.8%	17.5%	17.7%	9.6%	34.5%	18.3%	11.7%	9.9%	7.8%
Harm to your health	29.8%	24.1%	16.7%	16.4%	11.8%	19.9%	14.8%	10.7%	10.6%	10.6%
Harm to your work/ study	29.4%	12.9%	7.7%	7.8%	5.0%	22.8%	8.7%	4.4%	8.4%	6.7%
Been in a physical fight	23.0%	17.7%	7.2%	6.5%	3.9%	12.4%	5.7%	3.3%	7.3%	7.2%
Harm to friendship or social life	17.0%	15.2%	8.6%	7.6%	6.7%	17.2%	9.3%	6.5%	8.4%	7.3%
Stopped by police	15.7%	9.6%	4.6%	5.8%	4.4%	8.1%	4.4%	2.8%	6.6%	6.7%
Been in accident	14.5%	10.5%	5.8%	5.9%	5.0%	11.2%	5.1%	3.2%	7.0%	7.2%
Harm to home your life or marriage	10.4%	15.0%	10.5%	9.6%	7.8%	6.9%	7.5%	7.4%	8.8%	7.3%
Consequences in the last year from others' drinking (unweighted n=5,991)										
Assaulted by person who had been drinking	16.4%	11.2%	3.6%	3.5%	1.7%	8.6%	4.3%	2.2%	1.3%	0.0%
Passenger with drunk driver	9.3%	10.4%	4.2%	4.5%	2.7%	8.1%	6.4%	3.4%	2.5%	0.7%
Had property vandalised	7.4%	5.0%	5.4%	4.0%	3.1%	8.6%	7.1%	3.6%	3.5%	1.6%
Family problems	6.1%	8.6%	6.0%	4.7%	3.1%	9.4%	12.3%	7.1%	8.2%	4.6%
Money problems	2.1%	3.7%	2.0%	1.2%	1.7%	1.8%	2.8%	2.7%	2.9%	1.0%

TABLE 21 Harms to self: monthly binge drinkers compared to other (last year) drinkers

	All	Binge drank monthly or more	Did not binge drink monthly or more	Comparison between binge drinkers and other drinkers
Consequences in the last year from own drinking (unweighted n=4,647)				
Harm to your finances	20.3%	35.1%	11.5%	3.1 times more likely
Harm to your health	16.4%	24.7%	11.6%	2.0 times more likely
Harm to your work/study	10.4%	17.6%	6.2%	2.8 times more likely
Harm to friendship or social life	10.1%	15.7%	6.9%	2.3 times more likely
Harm to your home life or marriage	9.4%	13.9%	6.8%	2.0 times more likely
Been in a physical fight	9.0%	14.3%	5.8%	2.5 times more likely
Been in accident	7.0%	10.7%	4.9%	2.2 times more likely
Stopped by police	6.3%	8.9%	4.8%	1.9 times more likely



Days missed from work due to alcohol-related illness

Table 22 presents the proportion of drinkers who missed days from work or study due to alcohol in the year prior to the survey. These are presented by gender and by age group. Overall, 7.3% of males and 5.0% of females who drank in the last 12 months missed days from work or college due to alcohol-related illness (Table 22); this measure rose to 19.1% for young people aged 18–24 years (Figure 12). In the survey, 3,276 respondents who were either in employment or education missed 1,083 days of work or study due to alcohol-related illness in the 12 months prior to the survey (which equates with 4.5 person work- or study-years). When the proportion of working or studying days missed is applied to the total working and student population in Ireland, 736,486 work- or study-days or 3,230 work- or study-years were likely to have been lost in 2013.

TABLE 22 Number of days missed from work or study due to alcohol in the year prior to the survey by gender and age (unweighted n=1,502)

Number of days missed in the last year due to alcohol	Gender			Age group				
	All	Male	Female	18–24	25–34	35–49	50–64	65–75
0	95.7%	92.6%	95.0%	80.9%	92.6%	97.9%	98.3%	98.1%
1	1.3%	1.8%	1.3%	3.1%	2.4%	0.9%	0.5%	0.0%
2	1.2%	1.8%	1.1%	4.3%	2.1%	0.5%	0.3%	0.0%
3–5	1.2%	2.3%	1.1%	6.1%	2.0%	0.3%	0.5%	1.9%
6–9	0.3%	0.4%	0.5%	1.1%	0.7%	0.2%	0.0%	0.0%
10 or more days	0.4%	1.0%	1.0%	4.5%	0.3%	0.3%	0.3%	0.0%

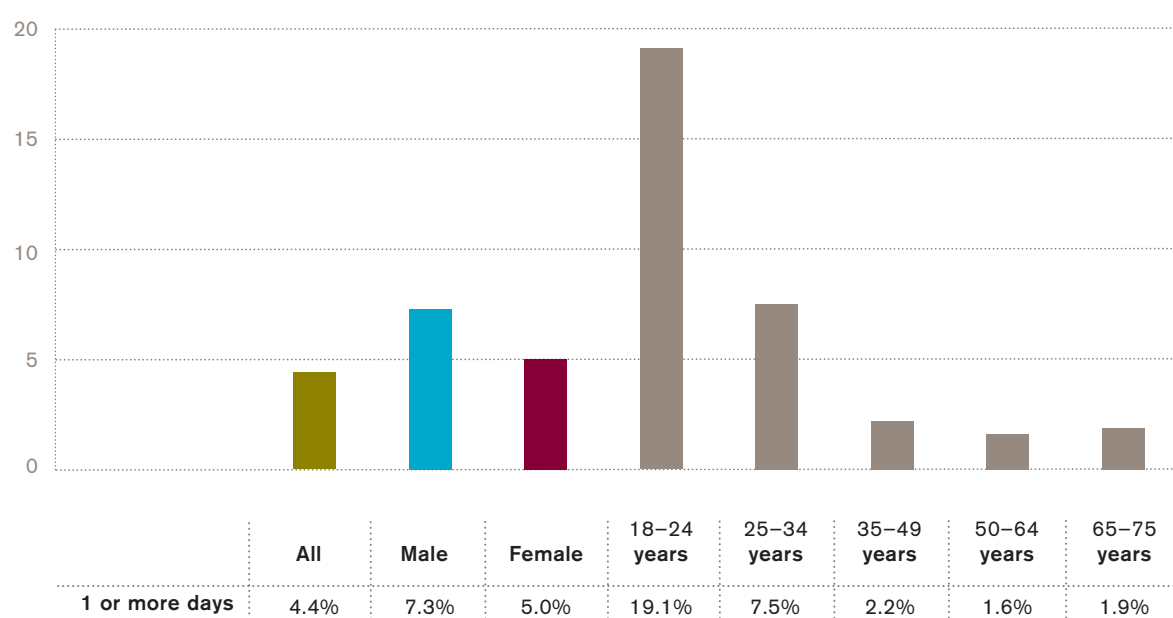


FIGURE 12 Proportion of drinkers who missed one or more days from work or study due to alcohol



Employment lost due to alcohol-related issues

Of the 442 people who said they were unemployed at the time of the survey, six (1.4%) reported that they lost their job as a result of their alcohol consumption. The CSO reported that 391,507 people were on the Live Register at the end of November 2013, and when the experience among this representative sample is applied to the unemployed population, it is possible that 5,315 people on the Live Register in November 2013 lost their job due to alcohol use.

Perception of alcohol consumption compared to actual alcohol consumption on a typical day in the last year

The respondents were asked to classify their own drinking behaviour. A small proportion of respondents (2.1%) classified themselves as heavy drinkers who may or may not binge drink, while 39.6% classified themselves as moderate drinkers who may or may not binge drink, and 58.3% classified themselves as light drinkers who may or may not binge drink (Figure 13).

When the self-perception assessment was cross-tabulated with the self-reported alcohol consumption on a typical drinking occasion, it was noted that a one-in-five self-defined 'light drinkers who do not binge drink' and half of the self-defined 'moderate drinkers who do not binge drink' actually do so on a typical drinking occasion without realising it, indicating that brief interventions are required at routine health visits and that clear, accurate, evidence-based information on low-risk drinking needs to be promoted.

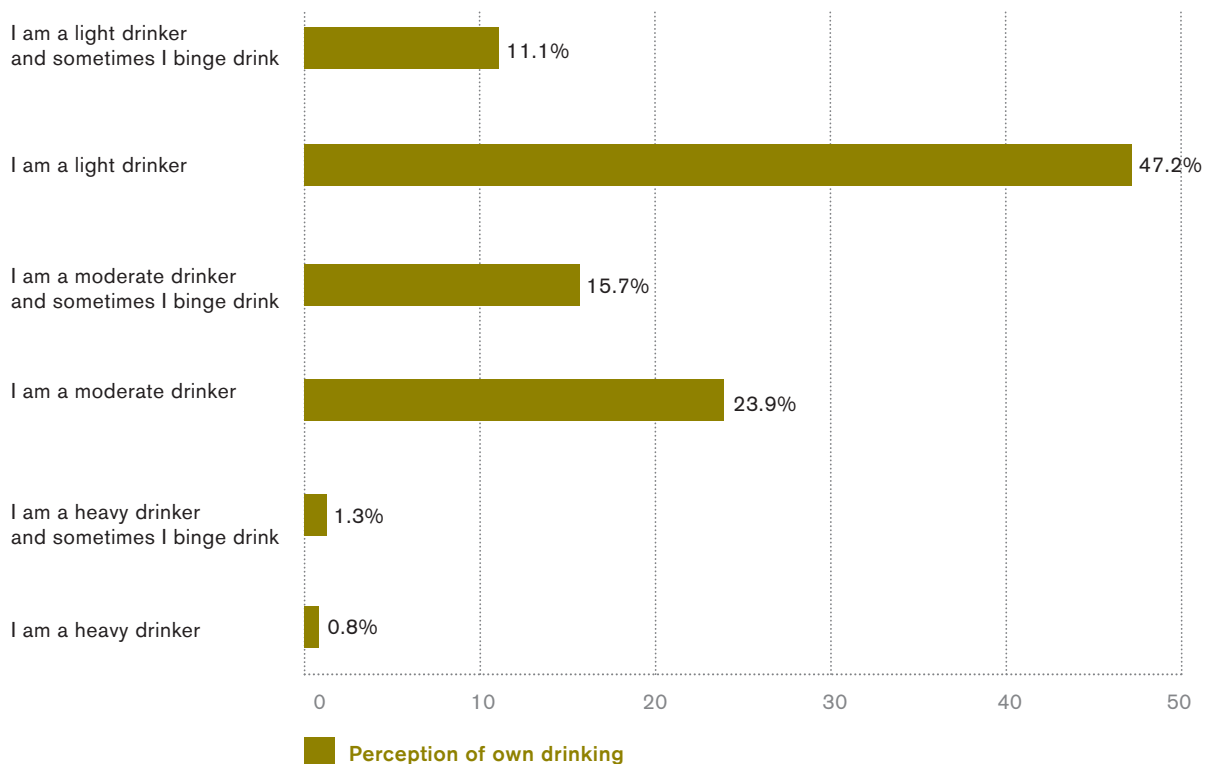


FIGURE 13 Own perception of alcohol consumption



CONCLUSION

In the survey 75% of the alcohol consumed was done so as part of a binge drinking session. Given the proportions of drinkers whose reported consumption of alcohol meets the international criteria for harmful drinking (including binge drinking and the consumption of weekly limits on a single occasion) or dependent drinking, it may be concluded that we, in Ireland, consume alcohol in an unhealthy pattern. In addition, a considerable proportion of 'self-defined light or moderate drinkers' actually drink 60g or more of alcohol on a typical drinking occasion (equivalent to binge drinking) and do not realise that they consume alcohol in an unhealthy manner. The above findings lead to the conclusion that harmful drinking is the norm in Ireland, in particular for men and women under 35 years.

The reported amount of alcohol consumed by the survey population in the year prior to the survey, when multiplied to include the entire adult population, indicated that adults in Ireland consume 4.2 litres of alcohol per person over 18 years. However, Revenue's provisional figures for 2013 indicate that 10.6 litres of alcohol per capita were sold in Ireland, which implies that Irish people reported 39% of their alcohol consumption, which is a considerable underestimate of total consumption.



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APPENDIX 1

TABLE 1 Unweighted survey sample compared to population profile (region)

Province	Total		Male		Female	
	Population	Survey	Population	Survey	Population	Survey
Dublin	28.8%	18.6%	14.0%	8.6%	14.8%	10.0%
Rest of Leinster	26.2%	27.1%	13.0%	12.8%	13.2%	14.3%
Munster	27.1%	28.3%	13.5%	13.3%	13.5%	15.0%
Connacht/Ulster	18.0%	26.0%	9.0%	12.1%	9.0%	13.9%
Total	100.0%	100.0%	49.6%	46.8%	50.4%	53.2%

TABLE 2 Unweighted survey sample compared to population profile (age)

Age group	Total		Male		Female	
	Population	Survey	Population	Survey	Population	Survey
18–24	12.7%	11.1%	6.3%	5.3%	6.4%	5.9%
25–34	23.4%	17.5%	11.4%	7.6%	12.0%	9.9%
35–44	21.5%	21.8%	10.8%	9.8%	10.7%	12.0%
45–54	18.0%	18.3%	8.9%	8.6%	9.1%	9.6%
55–64	14.4%	16.3%	7.2%	7.4%	7.2%	8.9%
65–75	10.1%	14.7%	5.0%	8.0%	5.1%	6.7%
Total	100.0%	100.0%	49.6%	46.8%	50.4%	53.2%



